

DHCW SHA Board Meeting - PUBLIC

Mon 02 February 2026, 10:00 - 14:30

Agenda

10:00 - 10:00
0 min

1. PRELIMINARY MATTERS

1.1. Welcome and introductions

For Noting

Chair

1.2. Apologies for Absence

For Noting

Chair

1.3. Declarations of Interests

For Noting

Chair

10:00 - 10:05
5 min

2. CONSENT AGENDA

2.1. Unconfirmed Minutes of 27 November 2025 Board Meeting

For Approval

Chair

i. Matters Arising

-  2.1 DHCW SHA Board Minutes 27112025v1 LT.pdf (14 pages)
-  2.1ii SHA Private Board Meeting Minutes 27 November 2025 ABRIDGED.pdf (4 pages)

2.2. Action Log (1)

For Noting

Chair

-  2.2 Action log.pdf (1 pages)

2.3. Forward Workplan

For Noting

Director of Corporate Affairs/Board Secretary

-  2.3 SHA Board Forward Plan.pdf (5 pages)

2.4. End of Year Reporting Approach

For Noting

Director of Corporate Affairs/Board Secretary

-  2.4 End of Year Reporting Approach - Feb 2026.pdf (6 pages)

2.5. DHCW Adaption Risk Assessment and Plan

For Noting

Director of Corporate Affairs/Board Secretary

-  2.5 DHCW Adaptation Risk Assessment and Plan Dec 25.pdf (6 pages)

2.6. Bio Diversity Report 2022-2025

For Noting

Director of Corporate Affairs/Board Secretary

-  2.6 Biodiversity Report 2022-2025 (Section 6).pdf (5 pages)

2.7. Technium 2 Release Renewal

For Approval *Director of Corporate Affairs/Board Secretary*

 2.7 Estates Technium 2 Lease Renewal.pdf (7 pages)

10:05 - 10:30 3. MAIN AGENDA

25 min

3.1. Shared Listening and Learning Presentation - DHCW Data Warehouse: analysis and data for research and innovation

For Discussion *Executive Medical Director*

 3.1DHCW Information Services Supporting Research and Innovation.pdf (4 pages)

10:30 - 10:45 4. FOR REVIEW

15 min

4.1. Interim Chair & Vice Chair Report

For Discussion *Chair*

 4.1 Chair and Vice Chair Report February 2026.pdf (6 pages)

4.2. Chief Executive Officer Report

For Discussion *Chief Executive Officer*

 4.2 CEO Report Feb 2026.pdf (6 pages)

10:45 - 12:00 5. STRATEGIC ITEMS

75 min

5.1. Strategy Assurance Group Report

For Discussion *Executive Director of Strategy*

 5.1 StrategyAssuranceGroup_Report_SHA-Board.pdf (9 pages)

5.2. Integrated Medium Term Plan Update 26-29

For Noting *Executive Director of Strategy/Executive Director of Finance*

i. 2026-2027 Budget Allocation

 5.2 DHCW-Board IMTP 2026-29 Progress Update Jan 2026.pdf (6 pages)

5.2.1. Comfort Break - 10 minutes

5.3. National Target Architecture Update

For Assurance *Executive Director of Strategy*

 5.3 National Target Architecture Update.pdf (6 pages)

5.4. Programme Typology & DHCW Playbook

For Noting *Executive Director of Strategy*

 5.4 SHA Board Programme Typology Report Cover Sheet 2601.pdf (5 pages)

12:00 - 14:30 6. GOVERNANCE, RISK, PERFORMANCE AND ASSURANCE

150 min

6.1. DHCW Escalation Update

For Assurance *Director of Corporate Affairs/Board Secretary*

 6.1 Escalation Status Improvement Plan Update.pdf (7 pages)

6.1.1. Lunch Break - 30 minutes

6.2. Finance Report

For Discussion *Executive Director of Finance*

 6.2 SHA Finance Report Cover January 2026 D-01.pdf (11 pages)

6.3. Strategic Procurement Report

For Approval *Executive Director of Finance*

 6.3 Strategic Procurement Report.pdf (5 pages)

6.4. Corporate Risk Register

For Discussion *Director of Corporate Affairs/Board Secretary*

 6.4 Corporate Risk Register - Feb 26 SHA.pdf (7 pages)

6.4.1. Comfort Break - 10 minutes

6.5. People & Culture Report

For Noting *Director of People & OD*

i. People & OD Strategy

 6.5 People and Culture Report SHA Board.pdf (8 pages)

6.6. Performance Report

For Discussion *Executive Director of Finance*

 6.6 Performance Report.pdf (9 pages)

6.7. Audit and Assurance Committee Highlight Report

For Assurance *Committee Chair*

 6.7 A&A Highlight Report.pdf (5 pages)

6.8. Digital Governance & Safety Committee Highlight Report

For Assurance *Committee Chair*

 6.8 DG&S Highlight Report.pdf (5 pages)

6.9. Local Partnership Forum Highlight Report

For Assurance *Committee Chair*

 6.9 Local Partnership Forum Highlight Report 04 December 2025.pdf (5 pages)

6.10. Remuneration & Terms of Service Committee Highlight Report

For Assurance *Committee Chair*

 6.10 RATs Highlight Report.pdf (4 pages)

0 min

7.1. Any Other Urgent Business

For Discussion

Chair

7.2. Date of Next Meeting: Thursday 26 March 2026

For Noting

Chair

DHCW SHA Board Meeting – Unconfirmed Public Minutes

Minutes of the meeting of Digital Health and Care Wales (DHCW) Special Health Authority Board (SHA) held on Thursday 27 November 2025 as a virtual meeting broadcast live via Zoom.

 10:00 – 15:15

 27 November 2025

 ZOOM

Members Present	Initial	Title	Organisation
Ruth Glazzard	RG	Interim Chair of the Board	DHCW
Ifan Evans	IE	Executive Director of Strategy	DHCW
Paul Evans	OE	Associate Board Member – Trade Union	DHCW
Rowan Gardner	RG	Independent Member	DHCW
Sam Hall	SH	Director of Primary, Community & Mental Health Digital Services	DHCW
Rhidian Hurle	RH	Executive Medical Director	DHCW
Marilyn Bryan Jones	MBJ	Independent Member	DHCW
Marian Wyn Jones	MWJ	Independent Member	DHCW
Sam Lloyd	SL	Executive Director of Operations	DHCW
Alistair Klaas Neill	AKN	Independent Member	DHCW
Claire Osmundsen-Little	COL	Deputy Chief Executive Officer Executive Director of Finance	DHCW
David Selway	DS	Independent Member	DHCW
Helen Thomas	HT	Chief Executive Officer	DHCW

In Attendance	Initial	Title	Organisation
Jessica Blackburn-Smith (for item 3.1 only)	JBS	E-library Specialist Lead	DHCW
Chris Darling	CD	Director of Corporate Affairs Board Secretary	DHCW
Samantha Morgan	SM	Director Of People & Organisational Development	DHCW

DHCW SHA Board Meeting 27 November 2025 – Minutes produced with the support of Co-Pilot.

Nathan Couch	NC	Audit Performance Lead	Audit Wales
Andrew Doughton	AD	Performance Audit Manager	Audit Wales
Rachel Sully (for item 3.1 only)	RS	Head of Research and Innovation	DHCW

Observing	Title	Organisation
Shanti Karupiah	Observer	Future Members Programme
Julie Robinson	Corporate Governance Coordinator (Secretariat)	DHCW
Laura Tolley	Head of Corporate Governance Deputy Board Secretary	DHCW

Apologies	Title	Organisation

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	FBC	Full Business Case
IM	Independent Member	IMTP	Integrated Medium-Term Plan
WG	Welsh Government	DG&S	Digital Governance & Safety Committee
A&A	Audit & Assurance Committee	PDC	Programmes Delivery Committee
NDR	National Data Resource	POD	People & Organisational Development
INPS	In Practice Systems	WICIS	Welsh Intensive Care Information System
NTA	National Target Architecture	GP	General Practitioner
RISP	Radiology Informatics System Programme	LIMS	Laboratory Information Management System
MI	Major Incident	Q1, Q2...	Quarter 1, Quarter 2...
BOF	Building Our Future	CAVUHB	Cardiff & Vale University Health Board
SLAs	Service Level Agreements	EHR	Electronic Health Record
DDaT	Digital, Data and Technology	OKRs	Objectives and Key Results

KPIs	Key Performance Indicators	EPS	Electronic Prescription Service
UHB	University Health Board	AI	Artificial Intelligence
GDaD	Government, Digital and Data	RATS	Remuneration & Terms of Service Committee
LPF	Local Partnership Forum	WPOCT	Welsh Point of Care Testing
MoU	Memorandum of Understanding	WIS	Welsh Immunisation System
RADIS	Wales Radiology Information System		

Item No	Item Detail	Outcome	Action
PART 1 – PRELIMINARY MATTERS			
1.1	Welcome and Apologies The Interim Chair welcomed everyone bilingually to the DHCW SHA Board meeting and confirmed the meeting was being broadcast live via Zoom. In addition, the recording would be available via the DHCW website for any person unable to access the live meeting. The Chair provided some housekeeping notices regarding the technical aspects of live streaming the meeting, the planned breaks, and the use of the consent agenda for items 2.1 to 2.4.	Noted	None to note
1.2	Apologies for Absence No apologies for absence were received.	N/A	None to note
1.3	Declarations of Interest There were no declarations of interest.	N/A	None to note
PART 2 – CONSENT AGENDA			
2.1	Unconfirmed Minutes of 29 September 2025 Board Meeting i. Matters Arising The minutes of 29 September 2025 were approved subject to one minor amendment which had been included in the confirmed set of minutes. The Board meeting can be watched in full below or by following the link in the title.	Approved	None to note



The Board resolved to:
APPROVE the minutes of 29 September 2025 Board Meeting.

2.2	Action Log (0) There were no public actions on the log. The Board resolved to: NOTE the Action Log.	Noted	None to note
2.3	Forward Workplan The Board resolved to: NOTE the Forward Plan.	Noted	None to note
2.4	Quality Framework The Board resolved to: APPROVE the Quality Framework	Approved	None to note
MAIN AGENDA			
FOR DISCUSSION			
3.1	Shared Listening and Learning Presentation Open Access Publishing Rhidian Hurlle, Executive Medical Director (RH) introduced Open Accessing Publishing providing some background information, and was accompanied by Rachel Sully, Head of Research and Innovation (RS) and Jessica Blackburn-Smith, E-library Specialist Lead (JBS), who presented a set of slides. - Open Access is a publishing model that makes research outputs available on line with no cost to the reader. - DHCW's Open Access Policy (approved September 2024) requires all DHCW-authored works to be published open access, preferably via diamond or green routes to avoid publication fees.	Received & Discussed	None to note

- The e-Library team supports staff with journal selection and repository deposits. The repository now holds 30 plus works, with ongoing additions.

The following areas were highlighted from the discussion.

- There is active collaboration with Directors of Workforce to identify colleagues on advanced degree programmes, aiming to engage them in research that benefits both their studies and the organisation. Additionally, support for including their work in the repository and assisting with publication is provided.
- DHCW runs sessions on how to publish research, especially during open access week and records these for wider sharing. The goal is to support anyone who has completed research to publish evidence-based work, with a particular focus on nursing and allied health professionals.
- Efforts are underway to register the repository with recognised ID services and to link with other repositories, increasing visibility and accessibility.
- Communication strategies include working with the comms teams, participating in communities of practice and sharing best practices to raise awareness and celebrate research achievements.
- Information is available on the eLibrary website about open access publishing routes (green, diamond and gold), but NHS Wales-wide support is currently limited, with most open access publishing handled at Health Board Trust level. A feasibility study is planned to identify current support and potential improvements.
- DHCW collaborates with library and information services to demonstrate the impact of research outputs, but recognised the need for a centralised space to collect and track research for organisational and historic purposes.

The Board resolved to:

RECEIVE and **DISCUSS** the Shared Listening and Learning Presentation on the Open Access Publishing

PART 4 – FOR REVIEW

4.1	Interim Chair and Interim Vice Chair Report The Interim Chair confirmed she had met with the new Chief Executive of NHS Wales, Jacqueline Totterdell who had advised of her support for DHCW on delivering key programmes, improving NHS data sharing and viewing digital transformation as essential. The Board resolved to: RECEIVE the contents of the interim Chair and Interim Vice Chair	Received & Discussed	None to note
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	report.		
4.2	Chief Executive's Report Helen Thomas, Chief Executive Officer (HT), presented the Chief Executive's report and the following highlights were provided: - The NHS Wales app: the work with the Planned Care Programme to surface secondary care referrals from GP practices into the NHS app had gone live. The final health board, Cardiff and Vale (C&V) which operates its own system, is scheduled to launch next week. The achievement reflects the strong cross-Wales cooperation. - Productive discussions with DHCW have advanced the regional joint digital agenda and progress was positive. - The DDaT Leadership Board met recently, with the Minister and Jacqueline Totterdell in attendance. Key topics discussed included the app, digital maternity and the radiology programme. - The establishment of the new DDaT sub-structures to support ongoing work was discussed. Timelines and representation for these groups were being developed, with the first meeting which will focus on Terms of Reference and membership, scheduled before January. Concerns remain regarding the pace of progress in establishing fundamental structures, DHCW continues to work closely with Welsh Government to support the development of these sub-structures. - At the Gartner Symposium, the new government strategy on AI was discussed, this included the formation of a cross-sector AI leadership group. Ifan Evans, Executive Director of Strategy, had been nominated as DHCW's representative. The Board resolved to: RECEIVE the contents of the Chief Executive's report.	Received & Discussed	None to note

PART 5 – STRATEGIC ITEMS

5.1	Board Assurance Framework Dashboard Update Chris Darling, Director of Corporate Affairs/Board Secretary (CD), presented the report outlining principal risks and management actions. The executive leads summarised each mission and associated risks. Mission 1 Provide a platform for enabling digital transformation– Ifan Evans, Executive Director of Digital Strategy (IE) provided an update. Following a team review, the risk appetite remained unchanged and continues to be highly cautious. No significant concerns had been identified and current objectives were on track. While there was some technical debt related to equipment, the associated risk was moderate and an improvement plan was in progress. Several gaps had been identified, with mitigation	Noted	None to note
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actions outlined, including a multi-year plan to migrate data from the current infrastructure to the new NDR infrastructure.

Mission 2 Deliver high quality technology, digital products and services – Sam Lloyd, Executive Director of Strategy (SL) reported a moderate risk level related to delivering secure and resilient services, with progress in system migration, agile training, integration service development and a new e-referrals service.

Mission 3 Expand the digital health and care record and the use of digital to improve health and care – led by IE. The risk covers the access to DHCW's systems, including the NHS Wales app and professional platforms such as the Welsh Clinical Portal. The risk is carefully managed, with a moderate risk appetite to ensure stability. These critical systems have consistently high availability, operating 99% of the time. CANISC had been decommissioned, with the focus now shifted to the cancer pathway roadmap.

Mission 4 Drive better values and outcomes through innovation

RH provided the overview of mission 4 which focuses on using organisational data to improve outcomes. The key actions include submitting the Digital Economy Act Accreditation Annual Review, advancing the 'find, recruit and follow up' initiative and developing dashboards to monitor information product performance.

Mission 5 Be the trusted strategic partner and a high quality, inclusive and ambitious organisation Claire Osmundsen-Little, Executive Director of Finance (CO-L) provided the update. The risk status was assessed and remains at amber which reflected the moderate risk appetite and the fact that several key controls and action plans are still in progress. Strong progress was noted in commercial and social value areas, while the digital workforce and quality initiatives continue to advance.

CD expressed his appreciation to all those involved in the input to the Board Assurance dashboard and emphasised the team's commitment to articulating the impact of the actions. The focus remains on long-term strategic risks and recent discussion had been valuable in challenging the team to consider if enough was being done and if further actions were needed.

The Board resolved to:

NOTE the Board Assurance Framework Update

	actions outlined, including a multi-year plan to migrate data from the current infrastructure to the new NDR infrastructure. Mission 2 Deliver high quality technology, digital products and services – Sam Lloyd, Executive Director of Strategy (SL) reported a moderate risk level related to delivering secure and resilient services, with progress in system migration, agile training, integration service development and a new e-referrals service. Mission 3 Expand the digital health and care record and the use of digital to improve health and care – led by IE. The risk covers the access to DHCW's systems, including the NHS Wales app and professional platforms such as the Welsh Clinical Portal. The risk is carefully managed, with a moderate risk appetite to ensure stability. These critical systems have consistently high availability, operating 99% of the time. CANISC had been decommissioned, with the focus now shifted to the cancer pathway roadmap. Mission 4 Drive better values and outcomes through innovation RH provided the overview of mission 4 which focuses on using organisational data to improve outcomes. The key actions include submitting the Digital Economy Act Accreditation Annual Review, advancing the 'find, recruit and follow up' initiative and developing dashboards to monitor information product performance. Mission 5 Be the trusted strategic partner and a high quality, inclusive and ambitious organisation Claire Osmundsen-Little, Executive Director of Finance (CO-L) provided the update. The risk status was assessed and remains at amber which reflected the moderate risk appetite and the fact that several key controls and action plans are still in progress. Strong progress was noted in commercial and social value areas, while the digital workforce and quality initiatives continue to advance. CD expressed his appreciation to all those involved in the input to the Board Assurance dashboard and emphasised the team's commitment to articulating the impact of the actions. The focus remains on long-term strategic risks and recent discussion had been valuable in challenging the team to consider if enough was being done and if further actions were needed. The Board resolved to: NOTE the Board Assurance Framework Update		
5.2	IMTP 2026/29 Ifan Evans, Executive Director of Strategy (IE) presented the IMTP 2026/29 update and highlighted the following key points: Further guidance was awaited from Welsh Government to begin the next phase of development. Portfolio adjustments this year focus on better alignment with DHCW architecture and increased emphasis on AI. Missions 2 and 3 have been updated to reflect	Noted	None to note

DHCW's growing digital footprint and user base.

The Key priorities:

- Delivering the long-term strategy through 2030.
- Aligning portfolio and product roadmaps, especially for in-house products.
- Ensuring the DHCW IMTP aligns with partner organisations, upcoming joint planning sessions would support this.
- Highlighting AI and new intelligence in the IMTP.

Discussions centred on the following:-

How alignment with digital priorities could be improved, particularly given challenges in Health Boards. These challenges are recognised with efforts to increase visibility of digital roadmaps. A session was planned with Digital Directors and Planning Directors to gather each organisation's digital roadmap for 206/27.

The financial outlook was becoming clearer, but investment opportunities would be minimised. There was a focus on cost reduction and productivity, with meetings planned with Digital Directors to discuss these issues.

DHCW have been proactive in their role of driving AI productivity and innovation with a free version of CoPilot being deployed to 10% of the organisation. DHCW could facilitate access to AI tools and ensure the right foundations are in place, however, this requires investment decisions to be made.

The Board resolved to:

NOTE the IMTP 2026/29

5.3

Stakeholder Review Action Plan Update

IE presented the Stakeholder Review Action Plan update.

The progress and achievements were demonstrated through a presentation which highlighted the following:

- The action plan stems from a comprehensive stakeholder review, which identified 27 recommendations and 75 deliverables for DHCW. Of these 44 were DHCW's sole responsibility, while 31 were joint deliverables with partners.
- Significant progress had been made: 70% of DHCW-owned actions and 61% of shared actions were complete. However, not all will be finished by year-end.
- There was a breadth of work covered by a small team and engagement was a collective effort across the organisation.
- The approach focussed on fostering collaboration and partnerships, including joint publications and events with NHS partners.

Noted

None to note

- Stakeholder feedback is actively sought through events and service desk interactions to assess satisfaction and quality.
- Collaboration with NWSSP Audit services was underway to develop meaningful measures and KPI's including pulse surveys and international benchmarking.
- There is a commitment to embedding robust measurement and reporting processes, with ongoing stakeholder advisory group involvement.

Challenges and next steps

- While much had been achieved, measuring the impact, particularly trust and relationships, remains challenging. There is recognition that some outcomes are difficult to quantify.
- The preference is to adopt a recognised industry standard for future comprehensive surveys, likely within the next 12-18 months.
- The team will continue to focus on delivery, refining measurement approaches and maintaining stakeholder engagement.

The Board resolved to:

NOTE the Stakeholder Review Action Plan Update.

PART 6 - GOVERNANCE, RISK, PERFORMANCE AND ASSURANCE

6.1	Finance Report Claire Osmundsen-Little, Executive Director of Finance (CO-L), presented a set of slides highlighting DHCW's financial position: • Financial targets are on track; with a revenue underspend of £200k in October. • 3.4m) was exceeded; due to low recruitment and mostly non-pay savings. • £30m had been received from Welsh Government. £8.7m capital allocation. • Main risks: digital inflation (8-16%), VAT issues and resource balancing. • All financial performance measures are green; capital spend - £4.9m; 98% pay policy compliance. • Directorate underspends due to vacancies; extra funding for Choose Pharmacy and EyeCare. • Cyber funding confirmed; e-referrals/integration hub not funding, may need budget rephasing. • Deficit reduced to £0.9m (from £2.7m); target £0.4m by the year-end.	Received & Discussed	None to note
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	The Board congratulated the team on achieving £3.6m in savings, noting that much of it was recurrent, which was beneficial for future planning. COL explained further the savings were largely non-pay and recurrent, mostly from operations and cloud-related areas. The target cash balance was around £3m, which fluctuates due to payment cycles. Maintaining this balance was challenging as organisational activity increased. The Board were assured that GP migration funding was covered by a specific support package with phased drawdown as payments were made to practices. For LIMs, while an overspend was forecast, ongoing portfolio reviews and deep dives with programme leads were balancing predicted under/overspends, therefore reducing the risk. COL touched on the VAT recovery; further detail was discussed in the private session. The Board were assured that the organisation was managing the situation prudently and would communicate any broader impacts as they became clear. The Board resolved to: RECEIVE and DISCUSS the Finance Report.		
6.2	Strategic Procurement Report CO-L presented two contract extensions and one MOU paper: - - P668 Data Centre 1 ("DC1") – the proposed extension supports the transition to cloud services, maintaining operational continuity for Health Boards and Trusts across Wales. - P997 National Health and Care Architecture for NHS Wales – the extension allows completion and further development of the National Architecture programme. - Memorandum of Understanding (MOU) – the MOU supports Welsh Government priorities, including the Healthier Wales vision and the Digital Health and Social Wales Strategy. Additionally, it aims to improve social and healthcare outcomes through enhanced collaboration. The Board were assured all proposed changes comply with relevant procurement regulations and have received legal review. The Board resolved to: APPROVE the following - P668 Data Centre 1 ("DC1") - P997 National Health and Care Architecture for NHS Wales - Memorandum of Understanding in relation to National Data Resource and Other Initiatives	Approved	None to note

6.3	Corporate Risk Register & Board Assurance Framework Report CD presented the Corporate Risk Register report advising that DHCW's Corporate Risk Register currently had 16 risks on the register, 14 of which were detailed within the report and two private risks which were considered at every Digital Governance and Safety Committee. CD highlighted the following key points: - Two new risks had been added: • Risk DHCW0237: new requirements impacting resources and delivery plans, i.e. additional requests from government and Health Boards have placed pressure on agreed plans, potentially delaying IMTP milestones. Mitigation involves transparent tracking and stakeholder engagement to clarify the source of pressures. • Risk DHCW0351: changes in the political landscape in Wales, particularly the upcoming Senedd elections, introduce uncertainty regarding future health policy and resource allocation. This risk will be closely monitored. Number of risks removed or downgraded • Risk DHCW0207: the Document Management Strategy was now 91% complete and had been downgraded, with ongoing monitoring until full completed. • Risk DHCW0318: Welsh Language Scheme Compliance, specifically regarding bilingual login for the NHS Wales app, had been downgraded due to number of complaints received to date and proactive engagement with the Welsh Language Commissioner's Office. • Private risk downgraded – the Digital Governance and Safety Committee were aware of the details. Annual Corporate Risk Trending Analysis • Over the past 12 months, 15 risks were escalated and 12 were downgraded or removed. • Some risks have remained due to challenges in mitigation, notably sustainable funding and fixed-term resource funding. • The Digital Governance and Safety Committee oversees the majority of corporate risks, especially those related to clinical informatics, cyber security, and information governance. • Most risks are service delivery-related and align with strategic missions 1 and 2. The Board continues to focus on long-standing risks, with ongoing efforts to address and resolve them through committee oversight and collaboration with partners.	Received & Discussed	None to note
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	The Board resolved to: RECEIVE the Corporate Risk Register		
6.4	Performance Report CO-L presented the Performance Report, highlighting the following items. • Statutory and Mandatory training compliance remains high. • There was a successful rollout of the electronic prescribing system. • Increased NHS app usage and GP migrations are progressing as planned. • Public section pay policy implementation is on track. • Of 330 milestones, 70 had been completed in the last two months. • Five milestones were forecast to later completion due to complexity and coordination. • DHCW prioritised and delivered key milestones, notably in the NHS app, National Architecture and vaccine programmes, while adjusting activities to meet Health Board requirements. • Vacancy-to-offer time increased to 57 days (target 51) due to high applicant volume. • National service ticket resolution and appraisal compliance fell below target, both are being addressed. • First-line fix rate declined slightly (19% vs 20% target) with skill development underway. • Quality management compliance improved and is no longer a concern. There was a slight increase in turnover rate rising from 7 to 9%, this was due to a number of fixed-term contracts coming to an end in January last year. The Board were advised that enhanced recruitment training had been implemented for line managers across DHCW to strengthen recruitment practices. The Board resolved to: RECEIVE the Performance Report.	Received & Discussed	None to note
6.5	Structured Assessment 2025 The Structured Assessment 2025 was co-presented by CD and colleagues from Audit Wales, who highlighted the collaborative approach taken during the audit process. Andrew Doughton, Audit Wales Head of Performance (AD) provided the background, noting the assessment's focus on Audit Committee effectiveness and identifying both strong arrangements and areas for improvement.	Received for Assurance	

	The Chair of the Audit and Assurance Committee, Marian Wyn Jones (MWJ) provided feedback from the Committee perspective; the assessment was positive, with clear assurances that an action plan was being developed to adopt suggestive positive practices. The Board discussed the recommendation relating to the Programmes Delivery Committee and it was agreed that Action 27-11-25-PUB-01 Audit Wales Colleagues would attend a future Committee meeting to advise on how the Committee could focus more on DHCW's actions to address programme delivery issues that are either within DHCW's direct control or ability to influence. The Board resolved to RECEIVE the Structured Assessment for ASSURANCE.		Action 27-11-2025-PUB-01
6.6	DHCW Escalation Status CD presented an update on DHCW's Escalation status, and the actions taken since moving from Level 1 routine monitoring to Level 3 enhanced monitoring in March. The escalation was specifically related to the delivery of major programmes. The key activities and progress: • Two recent IQPD meetings reviewed milestone progress and key projects including the National Target Architecture and NHS Wales App. • 35 of 36 milestones are complete; one (NHS Wales App) is partially delivered. Four milestones missed their deadlines but are now complete. • Board oversight continues, with a development session scheduled for 18 December. • Feedback on escalation status from the 17 November tripartite meeting is expected before Christmas. The Board discussed further the following areas: The upcoming review will focus on future planning, as most current deliverables under escalation are nearly complete, with only six out of 42 milestones remaining. The improvement plan's timeframe, set by Welsh Government, was 6-9 months, and discussions were commencing about future milestones and system learning for major digital programmes. The Audit Wales Structured Assessment was a key piece of evidence for tripartite discussions involving Audit Wales, Welsh Government and Health Inspectorate Wales, especially regarding governance and financial management. If the organisation is not de-escalated in December 2025, following the latest tripartite discussion, a new approach reflecting the escalation framework will be discussed with Welsh Government, potentially leading to new milestones or criteria. The Board resolved to: RECEIVE and DISCUSS the Escalation Update for ASSURANCE.	Received for Assured	None to note

6.7	Audit and Assurance Committee Highlight Report Marian Wyn Jones, Chair of Audit and Assurance Committee (MWJ) provided an update from the meeting held on 7 October 2025. A deep dive into a major shift towards embedding quality as a core organisational value, in line with the Health and Social Care Quality and Engagement Wales Act 2020 was received. An update on a counter fraud investigation and new anti-fraud legislation was also discussed. For further information on DHCW's Audit and Assurance Committee, follow the link in the title or alternatively by scanning the QR Code.  The Board resolved to: RECEIVE the Audit and Assurance Committee Highlight Report for ASSURANCE.	Received for Assurance	Note to note
6.8	Programme Delivery Committee David Selway, Chair of Programme Delivery Committee (DS) provided an update from the meeting held on 6 November 2025. The Committee regularly conducts in-depth reviews of major programmes. This meeting focuses on the Welsh Community Care information System (WCCIS) and its successor, Connecting Care, as well as the Digital Services for Patient and Public (NHS Wales app) and the National Data Resource. For further information on DHCW's Programme Delivery Committee, follow the link in the title or alternatively scan the following QR code.  The Board resolved to: RECEIVE the Programme Delivery Committee Highlight Report for ASSURANCE	Received for Assurance	None to note
PART 7 - CLOSING MATTERS			
7.1	Any Other Urgent Business There were no further items to discuss.	Discussed	None to note
7.2	Date of Next Meetings: Thursday 29 January 2026 The meeting closed at 14:45pm	Noted	None to note

DHCW SHA Board Meeting – PRIVATE ABRIDGED– Unconfirmed minutes

Minutes of the Digital Health and Care Wales (DHCW) Special Health Authority (SHA) Private Abridged Board Meeting held on Thursday 27 November 2025 as a virtual meeting via MS Teams.

 15:00 – 15:45

 27 November 2025

 MS Teams

Members Present	Initial	Title	Organisation
Ruth Glazzard	RG	Interim Chair of the Board	DHCW
Ifan Evans	IE	Executive Director of Strategy	DHCW
Rowan Gardner	RG	Independent Member	DHCW
Rhidian Hurle	RH	Executive Medical Director	DHCW
Marian Wyn Jones	MWJ	Independent Member	DHCW
Marilyn Bryan Jones	MBJ	Independent Member	DHCW
Sam Lloyd	SL	Executive Director of Operations	DHCW
Alistair Klaas Neill	AKM	Independent Member	DHCW
Claire Osmundsen-Little	COL	Deputy Chief Executive Officer / Executive Director of Finance	DHCW
David Selway	DS	Independent Member	DHCW
Helen Thomas	HT	Chief Executive Officer	DHCW

In Attendance	Initial	Title	Organisation
Chris Darling	CD	Director of Corporate Affairs Board Secretary	DHCW
Paul Evans	AF	Associate Board Member – Trade Union	DHCW
Sam Hall	SH	Director of Primary, Community & Mental Health Digital Services	DHCW
Samantha Morgan	SM	Director of People and Organisational Development	DHCW

Observing	Title	Organisation
Laura Tolley	Head of Corporate Governance Deputy Board Secretary	DHCW

Apologies	Title	Organisation

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DDaT	Digital, Data and Technology		

Item No	Item Detail	Outcome	Action
PART 1 – PRELIMINARY MATTERS			
1.1	Welcome and Apologies The Interim Chair welcomed everyone to the private session of Digital Health and Care Wales' SHA Board Meeting that was being held today to receive a number of items.	Noted	None to note
1.2	Apologies for Absence There were no apologies for absence noted.	Noted	None to note
1.3	Declarations of Interest The Interim Chair informed that Rowan Gardner may have had a declaration relating to item 2.2 WICIS due to a professional relationship. However, after discussion it was agreed that no conflict of interest was identified.	Noted	None to note
PART 2 – MAIN AGENDA			
FOR DISCUSSION			
2.1	National Intelligent Integrated Audit Solution (NIAS) Outline Business Case (OBC) Rhidian Hurle, Executive Medical Director presented the outline business case, emphasising its importance for public assurance regarding data access and its role in enabling a trust-based approach to healthcare record availability, rather than relying on predefined personas. The Board resolved to: NOTE the National Intelligent Integrated Audit Solution (NIAS) Outline Business Case	Noted	None to note
2.2	Welsh Intensive Care Information System (WICIS) – Verbal Update	Discussed	None to note

	Helen Thomas, Chief Executive Officer (HT) provided an update on the Welsh Intensive Care Information System (WICIS) who advised 15 December 2025 was agreed for a Welsh Government decision. The Board resolved to: DISCUSS the Welsh Intensive Care Information System (WICIS) verbal update		
2.3	Finance Update – VAT Briefing Claire Osmundsen-Little, Executive Director of Finance (COL) presented the report on the VAT treatment for digital licensing, particularly Office 365 and outlined the following:- ○ Negotiations with Microsoft and Market Impact: DHCW are engaging with Microsoft and monitoring developments in Scotland and England, aiming to leverage their position and seek support or value adjustments in light of the VAT changes. ○ Contingency Planning and Audit Implications: the roadmap for covering potential liabilities was outlined, including releasing provisions and supplier credits. Additionally, it was noted that any special payments, such as interest, would be reported through the audit committee. The Board resolved to: APPROVE the recommended approach and next steps including the payment of the VAT and interest included in the VAT Assessments received from HMRC	Approved	None to note
2.4	Audit + Update Sam Hall, Director of Primary, Community & Mental Health Digital Services provided an update on the Audit + system replacement and highlighted the following: ○ System Replacement Progress: the in-house replacement for Audit Plus was progressing well, leveraging internal digital capabilities and receiving positive feedback from Welsh Government representatives. ○ Contract Extension Decision: To ensure continuity of service, the Board agreed to extend the contract with the existing supplier, with a commitment to provide a detailed update at the next Board meeting. The Board resolved to: NOTE for ASSURANCE the Audit + Update	Assurance	None to note
PART 3 – CLOSING MATTERS			
3.1	Any Other Urgent Business There was no other urgent business raised.	N/A	None to note



3.2	Date and Time of Next Meeting TBC	N/A	None to note
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2.2 Action log

Title	Date of Meeting	Action/Decision Narrative	Action Lead	Due Date	Status/Outcome Narrative	Revised due date	Status	Business Area	Session Type
27-112025-PUB-A01	27/11/2025	Audit Wales colleagues to be invited to a future PDC committee to advise on how the committee could focus more on DHCW's actions to address programme delivery issues that are either within DHCW;s direct control or ability to influence.	Chris Darling (DHCW - Director of Corporate Affairs / Board Secretary);#20	16/12/2025	'DHCW engaging with Audit Wales colleagues to secure a date for a Programmes Delivery Committee Development session to share learning'		Underway		Public

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

FORWARD WORKPLAN REPORT

Eitem ar yr Agenda: Agenda Item:	2.3
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW’N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Julie Robinson, Corporate Governance Coordinator
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs / Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the report	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Laura Tolley, Head of Corporate Governance / Deputy Board Secretary	January 2026	Reviewed

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The Board has a [Cycle of Board Business](#) that is reviewed on an annual basis. Additionally, there is a forward workplan which is used to identify any additional timely items for inclusion to ensure the Board are reviewing and receiving all relevant matters in a timely fashion.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 The following items have been added to the Forward Workplan 2025-26 and are due to be presented at the meeting on 02 February 2026:

Item	Executive Lead
Action log	Director of Corporate Affairs/Board Secretary
Biodiversity Report 2022-2025 (Section 6)	Director of Corporate Affairs/Board Secretary
Chair & Vice Chair Report	Director of Corporate Affairs/Board Secretary
Chief Executive Report	Chief Executive Officer
Committee & Advisory Group Highlight Reports	Director of Corporate Affairs/Board Secretary
Corporate Risk Register Report	Director of Corporate Affairs/Board Secretary
Declarations of interest	Chair
End of Year Reporting Approach	Director of Corporate Affairs/Board Secretary
Estates - Technium 2 Lease Renewal	Director of Corporate Affairs/Board Secretary
Finance Report	Executive Director of Finance
Forward Work Plan	Director of Corporate Affairs/Board Secretary
Half Year Performance Against Plan	Executive Director of Strategy
IMTP Development Updates	Executive Director of Strategy
Minutes	Director of Corporate Affairs/Board Secretary
National Target Architecture (alt main agenda & CEO report)	Executive Director of Strategy
People and Culture Report	Director of People & OD
Performance Report	Executive Director of Finance
Programme Typology & DHCW Playbook	Executive Director of Strategy
Shared Listening and Learning	Executive Medical Director
Strategic Procurement Report	Executive Director of Finance
Strategy Assurance Group reporting	Executive Director of Strategy

4.2 In addition, the following items have been added to the Forward Workplan 2025-26 and are scheduled to be presented to the 26 March 2026 meeting:

Item	Executive Lead
Action log	Director of Corporate Affairs/Board Secretary
Annual Equality Report	Director of People & OD
Annual Review of Standing Orders	Director of Corporate Affairs/Board Secretary
Audit +	Director of Primary, Community and Mental Health Digital Services
Audit Wales Structured Assessment and Audit Letter	Director of Corporate Affairs/Board Secretary
Board & Committee Self-Effectiveness	Director of Corporate Affairs/Board Secretary
Chair & Vice Chair Report	Director of Corporate Affairs/Board Secretary
Chief Executive Report	Chief Executive Officer
Committee & Advisory Group Highlight Reports	Director of Corporate Affairs/Board Secretary
Committee & Advisory Groups Annual Reports	Director of Corporate Affairs/Board Secretary
Community & Mental Health Data & Digital Delivery Plan	Director of Primary, Community and Mental Health Digital Services
Corporate Risk Register Report	Director of Corporate Affairs/Board Secretary
Decarbonisation Action Plan 2025/2028	Director of Corporate Affairs/Board Secretary
Declarations of interest	Chair
Estates Plan 2025/2028	Director of Corporate Affairs/Board Secretary
Finance Report	Executive Director of Finance
Forward Work Plan	Director of Corporate Affairs/Board Secretary
Gender Pay Gap Annual Report	Director of People & OD
IMTP Development Updates	Executive Director of Strategy
MCSSP Letter to Public Bodies - Social Partnership Duty Reports	Director of People & OD
Minutes	Director of Corporate Affairs/Board Secretary
National Target Architecture (alt main agenda & CEO report)	Executive Director of Strategy
NHS Staff Survey Results	Director of People & OD
Performance Report	Executive Director of Finance
Primary, Community & Mental Health Update	Director of Primary, Community and Mental Health Digital Services
SHA Board Cycle of Business	Director of Corporate Affairs/Board Secretary
Shared Listening and Learning	Executive Medical Director
Standing Orders Approval	Director of Corporate Affairs/Board Secretary
Strategic Procurement Report	Executive Director of Finance
Strategy Report to include R&I Strategy	Executive Medical Director
WBFGA Statement and Objectives	Director of Corporate Affairs/Board Secretary

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 Several activities are underway to address the requirement to horizon scan both internally and across the healthcare system in Wales to inform the forward workplan for Board.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the report	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

END OF YEAR REPORTING APPROACH

Eitem ar yr Agenda: Agenda Item:	2.4
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	2 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Laura Tolley, Deputy Board Secretary Head of Corporate Governance
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs / Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the End of Year Reporting Approach.	



1 ASESIAD O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	BS 10008 - Evidential Weight & Legally Admissible Information Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 27001	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Information
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAD O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement:	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Evidence suggests there is correlation between governance behaviours in an organisation and the level of performance achieved at that same organisation. Therefore, ensuring good governance within the SHA supports quality and safety.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below The Annual Report should highlight any areas of improvement in relation to Socio Economic Duty.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling. Director of Corporate Affairs Board Secretary	January 2026	Reviewed

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
MFA	Manual for Accounts	AGM	Annual General Meeting
HTML	Hypertext Markup Language		



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The purpose of this report is to set out the proposed arrangements to meet national end-of-year reporting requirements for corporate governance.
- 3.2 The SHA is required to submit its Annual Report including its Accountability Report to Welsh Government following the commencement of the new financial year, after which the documents are to be received at its Annual General Meeting.
- 3.3 The Manual for Accounts (MfA) sets out that all NHS organisations are required to publish as a single unified document, a three-part Annual Report and Accounts which includes:
- The Performance Report
 - The Accountability Report
 - The Financial Statements
- 3.4 The Performance Report provides information on the entity, its main objectives and strategies and the principal risks it faces. The performance report must provide a fair, balanced and understandable analysis of the entity's performance, in line with the overarching requirement for the annual report and accounts to be fair, balanced and understandable.
- 3.5 The Performance Report will require contributions from senior leaders in the organisation as well as the Executive Team and will be used to communicate to the public and other stakeholders.
- 3.6 The Accountability Report is designed to meet the key accountability requirements to Welsh Government and comprises of the following elements:
- Corporate Governance Report
 - Remuneration and Staff Report and
 - A National Assembly for Wales Accountability and Audit Report
- 3.7 The Financial Statements comprises of the audited Annual Accounts, this will be managed by the Finance department and incorporated into the final document. Arrangements are being made to ensure additional Audit and Assurance Committees are planned to enable scrutiny and approval in appropriate time.
- 3.8 The Annual Report 2025-26 will be received and scrutinised at the Audit & Assurance Committee in detail prior to being submitted for approval.
- 3.9 The Annual Report 2025-26 requires input and collaboration from a number of senior leaders across the organisation. A task and finish group will comment in early February 2026 with updates on progress being shared with DHCW Weekly Executive Directors twice monthly to ensure timely input and delivery of the information and alignment with the required approvals from the SHA Board and relevant Committee.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 The Annual General Meeting (AGM) is planned for the 30 July 2026 the information from the Annual Report will be shared with the public, giving an opportunity for reflection, celebration and identification of key learning points for the future.
- 4.2 As per the agreed approach, the Annual Report will be published via HTML ([see example Annual Report 2024-25](#)), to allow far greater opportunity for accessibility best practice and publishing, in addition to a unified single PDF document as per MfA guidance requirements.
- 4.2 Our learning from previous years analysis has found that the Annual Report HTML is viewed on average between 3000-4000 times, with the following areas receiving the highest number of hits:
- Performance Report
 - Accountability Report & Accounts
 - Performance Analysis
 - Remuneration and Staff Report
 - Performance Summary
- 4.3 The Annual Report 2024-25 was a finalist in the national Corporate Governance Institute UK & Ireland Awards 2025 which was a huge achievement. The Annual Report 2025-26 Task & Finish Group will use the analysis from the 2024-25 report to inform and suggest innovative ideas to build on the way the 2025-26 report is produced and published.
- 4.4 The Task & Finish group have an ambition to reduce the length of the 2025-25 Annual Report, as much as possible within the MfA guidance requirements, supporting DHCW's principle of 'Simplify everything we do'.
- 4.5 Below is a high-level timeline for the production and publication of the 2025-26 Annual Report:

Activity	Due Date
Draft accounts due to Welsh Government and Audit Wales	May 2026
Integrated draft report due to Welsh Government and Audit Wales to include performance, accountability report and remuneration report	May 2026
Final Annual Report including accounts due to Welsh Government by Audit Wales	June 2026
Annual General Meeting	July 2026

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 Should the Annual Report 2025-26 not be populated, reviewed and approved in a timely manner, DHCW will not meet its statutory reporting requirements and timelines as set out by Welsh Government and DHCW Standing Orders.
- 5.2 The Annual General Meeting date is yet to be confirmed by Welsh Government and Audit Wales,



and this may have an impact on DHCW timescales.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the End of Year Reporting Approach.	

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES ADAPTATION RISK ASSESSMENT AND PLAN

Eitem ar yr Agenda: Agenda Item:	2.5
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	2 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Julie Ash, Head of Estates and Compliance
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs / Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the DHCW Adaptation Risk Assessment and Plan	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Globally Responsible Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	ISO 14001 - Environmental Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Culture
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Efficient
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission:
No, (detail included below as to reasoning)	Outcome:
Statement: Not required for this report.	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Environmental benefits
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Compliance with legislation and Climate Change Targets
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below Staff involvement in environmental initiatives
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below Wider social impact of environmental improvements
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling	2 December 2025	Approved
Weekly Executives Meeting	10 December 2025	Approved
SHA Board	2 February 2026	For noting

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
WHC	Welsh Health Circular		

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 On 21 February 2025, Welsh Government hosted the inaugural Climate Emergency Spread and Scale Leadership Day. This event brought senior leaders together from across NHS Wales and showcased innovative initiatives proven to help meet climate change commitments, alongside also improving patient outcomes, reducing costs and improving staff engagement.
- 3.2 Much of the leadership day focused on activity to help decarbonise NHS Wales, however it did not lose sight of the need to also ensure the NHS builds its climate resilience. The recent winter storms are a stark reminder of how communities and NHS services are directly affected, with the science showing that these events will continue to become more pronounced and frequent over the coming years and decades.
- 3.3 WHC/2025/005 *Climate emergency leadership day and adaptation* was issued to all Chief Executives in March 2025. It set out the expectation that all organisations will have completed scoping, current and future risk assessment (sections 1 to 3 outlined in the Toolkit) and to have plans in place prioritising what short and longer term actions will be taken (sections 4 and 5) by 31 December 2025. The health and social care climate emergency national programme will continue to collaborate with organisations to provide guidance on this work as required.
- 3.4 DHCW have utilised the Toolkit to undertake a [Risk Assessment](#) and have developed an [Adaptation Plan](#) which includes short and longer term actions. The assessment and plan were approved by the Executive Team on 10 December 2025.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 The risk assessment considered factors such as:

Description	Stakeholder	Impact
Risks to health and wellbeing from high temperatures	Health Boards, Contractors, Public Health Wales, NHS Wales staff, Patients	Increased emergency admissions impacting on the IT system
Risks to health and wellbeing from high temperatures	Health Boards, Contractors, Public Health Wales, NHS Wales staff, Patients	Increased demand on primary care access (GP appointments, pharmacies) impacting on the IT system



Risks to health and wellbeing from high temperatures	Health Boards, Contractors, Public Health Wales, NHS Wales staff, Patients	Higher temps impacting on infrastructure, equipment and digital medicines - causing vital equipment to stop working
Risks to people, communities and buildings from flooding	Health Boards, Local Authorities, Estates Teams, IT Infrastructure Teams	Risk of IT infrastructure being damaged
Risks to business from reduced employee productivity due to infrastructure disruption and higher temperatures in working environments	DHCW Management, HR Departments, Operational Teams, Staff	Risk of essential work not being carried out
Risks to business from disruption to supply chains and distribution networks due to extreme weather	Procurement Teams, Suppliers, Logistics Partners, IT Service Providers	Supply chains being disrupted (including digital)
Risks to high energy usage from high and low temperatures, high winds, lightning	Facilities Management, Energy Providers, IT Infrastructure Teams	Increased energy usage due to extreme weather
Risks to transport and subsequent IT delivery from high and low temperatures, high winds, lightning	Transport Providers, Health Boards, IT Equipment Suppliers, Contractors	Occurrences of primary care facilities not being able to get the IT equipment needed

4.2 The Plan identifies mitigating actions that will reduce these risks.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 Progress against actions in the DHCW Adaptation Plan will be monitored by the Decarbonisation and Energy Working Group.



GIG
CYMRU
NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

SHA Board is being asked to

NOTE the DHCW Adaptation Risk Assessment and Plan

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

BIODIVERSITY REPORT 2022-25

(SECTION 6)

Eitem ar yr Agenda: Agenda Item:	2.6
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	2 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Julie Ash, Head of Estates and Compliance
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs / Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the 2022-25 Biodiversity Report	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Globally Responsible Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	ISO 14001 - Environmental Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Culture
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Efficient
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission:
No, (detail included below as to reasoning)	Outcome:
Statement: Not required for this report.	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Environmental benefits
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Compliance with legislation
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below Staff involvement in environmental initiatives
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below Wider social impact of environmental improvements
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling	2 December 2025	Approved
Management Board	11 December 2025	Approved
SHA Board	2 February 2026	For noting

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
NRAP	Nature Recovery Action Plan		



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 This [DHCW 2022-25 Biodiversity Report](#) has been prepared in accordance with Section 6 of the Environment (Wales) Act 2016, which places a duty on public authorities to seek to maintain and enhance biodiversity in the exercise of their functions, and in doing so, promote the resilience of ecosystems. The duty reflects Wales's commitment to reversing biodiversity loss and ensuring that ecosystems are robust and capable of adapting to change.
- 3.2 As stipulated under subsection (7) of the Act; public authorities are required to publish a report every three years detailing the actions taken to comply with this duty. The attached report is our first, outlining the measures undertaken to support biodiversity and ecosystem resilience within DHCW's area of operations.
- 3.3 The report aims to provide accountability for our environmental actions, highlight key achievements, identify challenges encountered, and inform future biodiversity planning. It also contributes to the collective evidence base that supports a pan-Wales evaluation of the implementation and impact of the Section 6 duty.
- 3.4 On 7th October 2025, Huw Irranca-Davies AS/MS, Deputy First Minister and Cabinet Secretary for Climate Change and Rural Affairs wrote to Public Authorities reminding them of the requirement for a three-year report to be published prior to the end of the 2025.
- 3.5 Digital Health and Care Wales (DHCW) is committed to supporting and enhancing biodiversity across its estate. We recognise the importance of protecting native species and creating sustainable environments.
- 3.6 DHCW is classed as a 'Group 1' organisation, as set out in the Section 6 reporting guidance document, as we rent an office building(s) and our remit is not directly connected to biodiversity and/or land management. DHCW has developed and started implementing a Biodiversity Recommendations Action Plan. This plan outlines practical, site-specific actions to improve habitats, engage staff, and contribute to national biodiversity aims.
- 3.7 The Environment (Wales) Act Reporting Guidance stipulates that Group 1 organisations should report against the following Nature Recovery Action Plan (NRAP) for Wales objectives:
- Objective 1: Engage and support participation and understanding to embed biodiversity throughout decision making at all levels.
 - Objective 4: Tackle key pressures on species and habitats
 - Objective 6: Put in place a framework of governance and support for delivery

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 Over the past year, DHCW has undertaken biodiversity assessments across its four main office sites: Tŷ Glan-yr-Afon (Cardiff), Bocam (Bridgend), Technium 2 (Swansea) and Media Point (Mold). These surveys identified existing habitats and opportunities for enhancement.
- 4.2 Within our report, we report achievements under three categories:

 - At our Sites
 - Around our Sites – in the Local Area
 - Other Measures
- 4.3 Activities reported upon include liaison with Landlords to increase planting, raising staff awareness, sustainable travel, volunteering in the local community (parks), decarbonisation and adaptation initiatives and waste management. Other reporting is in place in a number of these areas.
- 4.4 As a result of recommendations from the biodiversity assessments undertaken (4.1), DHCW has produced a detailed action plan which is being progressed. The report summarises key areas covered in the action plan.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 Progress against actions in the DHCW Biodiversity Plan, which was approved by Management Board on 11 December 2025, will be monitored by the Environmental Awareness Group.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the 2022-25 Biodiversity Report	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

ESTATES – TECHNIUM 2 LEASE RENEWAL

Eitem ar yr Agenda: Agenda Item:	2.7
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	2 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW’N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Julie Ash, Head of Estates and Compliance
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs / Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	For Approval
Argymhelliad: Recommendation:	SHA Board is being asked to
APPROVE the Technium 2 Lease Renewal	



1 ASESIAD O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT	A Globally Responsible Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS	ISO 14001 - Environmental Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER	Culture
PARTH ANSAWDD DOMAIN OF QUALITY	Efficient
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
DATGANIAD ASESIAD O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: January 2024
Yes, applicable	Outcome: Positive
Statement: The equalities assessment on our overall Estates position to date (undertaken in 2024) has not found that there is a risk that a disproportionately negative impact could exist to one or more groups of people who share a protected characteristic under the Equality Act 2010. However, any office closure would have an impact (positive or negative) for staff who would need to change base (noting the hybrid working protocols in place). A full assessment will be undertaken if such a change is proposed and will provide additional analysis of staff data, to ensure that any risk identified can be removed or reduced through the implementation of the actions to be agreed through consultation.	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Measures are in place at all DHCW sites to ensure that working environments are safe
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Compliance with legislation and lease terms and conditions
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Proposals are costed
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below Any changes to the estate with impact for staff chasing their base will be subject to consultation
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below Social impacts on health are embedded in the broader environment and shaped by complex relationships between economic systems and social structures
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling	2 December 2025	Approved
Management Board	11 December 2025	Approved
SHA Board	2 February 2026	

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
NWSSP	NHS Wales Shared Services Partnership	UWTSD	University of Wales Trinity Saint David



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NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 Digital Health and Care Wales (DHCW) currently have 4 leased offices across Wales:
- Ty Glan-yr-Afon, Cardiff
 - Bocam Park, Pencoed
 - Technium 2, Swansea
 - Media Point, Mold
- 3.2 The DHCW Estates Plan 2025-28, which was shared with LPF for early engagement, was approved by Management Board and Board in March 2025. The plan was created considering the following factors:
- Decarbonisation challenges and the need to continue to lessen the DHCW carbon footprint
 - Hybrid Working Arrangements
 - The need to rationalise the Estate to ensure that it optimises the workspaces and reflects our changed ways of working
 - Our duty to make the best use of its financial resources and requirement to ensure that we demonstrate value for money from all assets
 - To proactively plan for lease expiry dates
- 3.3 The Estates Plan for 2025-2028 reflects DHCW's future focus on estates modernisation and optimisation.
- 3.4 An Estates Development Group, which is chaired by the Director of Corporate Affairs/Board Secretary, meets monthly. This Group includes representation from all Directorates of DHCW and enables staff input into future plans, and estates issues and priorities.
- 3.5 At the same time as taking action to enhance the estate for DHCW staff, DHCW have worked closely with Welsh Government and NWSSP to progress estates rationalisation opportunities and opportunities to share space where appropriate. The Welsh Government Policy direction for non-clinical space has been for organisations to look at estate rationalisation opportunities which can be derived from:-
- Disposing of surplus freehold property
 - Terminating leases or renewing leases on a reduced footprint
 - Sharing accommodation with other NHS bodies and the wider public sector
 - Letting surplus accommodation to the private sector

There is further opportunity for estates rationalisation in Technium 2 when the lease expires in March 2026. We have met with the University of Wales Trinity Saint David (UWTSD), the Landlord, to discuss proposals for reduced space. Our Estates Plan states that DHCW will:

"Undertake an option appraisal relating to the Swansea Office (Technium 2) to consider:

➤ If DHCW continue to occupy on a reduced footprint, and if so, by how much; or

- *If DHCW exit at the end of the current lease in March 2026 and relocate to an alternative location;”*

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 An options appraisal relating to the future of the Swansea office was completed and has been reviewed by Executives in detail over the summer of 2025 with the option of remaining on site with a smaller footprint being agreed on 10th September 2025, which will accommodate the Client Services function, a smaller office space and a large meeting room. We have worked collaboratively with the University to agree a reduced footprint which will be Units 4 & 5 plus the Madoc Room (3310 square feet). This was communicated to staff following ratification by our Board at their September 2025 meeting. Planning for re-configuration of the space to meet staff requirements is now underway with a project team being established which includes representation from Swansea based staff, Trade Unions, People and Organisational Development (POD), Digital Workspace and Estates.
- 4.2 UWTSD (the Landlord) issued Heads of Terms based on the reduced footprint outlined in 4.1 above in October 2025. The new annual rental value is £52,960 + VAT. A five-year term, with annual break options on both the tenant and landlords' side with a 6 month notice period is proposed.
- 4.3 As part of space reconfiguration and feedback from staff, we plan some limited structural work which will be undertaken under “Licence to Alter”.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 Management Board approved a lease renewal for a significantly reduced footprint for a five-year term with break options on 11 December 2025. The annual rental value is £52,960 + VAT per annum. This paper is submitted for SHA Board to approve the new arrangements.
- 5.4 Our priority is to optimise the DHCW Estate, reflecting its hybrid working policy ensuring that DHCW staff can continue to collaborate on a face-to-face basis.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
APPROVE the Technium 2 Lease Renewal	



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NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

DHCW INFORMATION SERVICES: SUPPORTING RESEARCH AND INNOVATION

Eitem ar yr Agenda: Agenda Item:	3.1
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Rhidian Hurle, Executive Medical Director
Paratowyd gan: Prepared By:	Gareth John, Head of Information Delivery
Cyflwynwyd gan: Presented By:	Gareth John, Head of Information Delivery

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS the presentation about how DHCW Information Services supports research and innovation.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Deliver high quality digital products and services
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RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A

<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Learning Improvement and Research
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Equitable
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	

<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement:	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Positive – the research and innovation can save money through use of best practice and most effective ways of working.
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below Positive – the effect of the research and innovation will be beneficial to patients in Wales.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	Yes, please see detail below Positive – this work will promote further research and innovation.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME

Acronymau Acronyms		
DHCW	Digital Health and Care Wales	SHA Special Health Authority



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The DHCW Information Services team receives, organises & maintains data from different sources in an all-Wales data repository. The team then analyse & visualise this data, and develop & deliver data products such as reports, dashboards and customised data requests. This work also supports research projects, in combination with the SAIL (Secure Anonymised Information Linkage) Databank. The presentation is attached as [Appendix 3.1i](#).

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 Though collaboration between DHCW Information Services and the SAIL Databank, we support many research and innovation projects, such as one focused on individuals with chronic pain, and another looking at mental illness in the last year of life. Though use of Natural Language Processing (NLP), digi-trials, and the National Data Resource (NDR) on Google Cloud Platform (GPC), there is scope for broader impact.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 There are no key risks and matters for escalation.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS the presentation about how DHCW Information Services supports research and innovation.	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

INTERIM CHAIR AND INTERIM VICE CHAIR REPORT

Eitem ar yr Agenda: Agenda Item:	4.1
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	2 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Chris Darling, Director of Corporate Affairs / Board Secretary
Cyflwynwyd gan: Presented By:	Ruth Glazzard, Interim Chair and David Selway, Interim Vice Chair

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	SHA Board is being asked to RECEIVE and DISCUSS the Interim Chair and Interim Vice Chair Report.



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement:	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Ruth Glazzard	Feb 2026	Reviewed
David Selway	Feb 2026	Reviewed

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
UHB	University Health Board	IM	Independent Member
EDI	Equality, Diversity and Inclusion	SRO	Senior Responsible Officer
DDaT	Digital, Data and Technology		



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 At each Public Board meeting, [the Chair](#), and [Vice Chair](#), present a report on key issues to be brought to the attention of the Board. This report provides an update on key areas and activities since the last Public Board meeting

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

Interim Chair:

4.1 Board Interim Arrangements

At the time of writing this report the interim arrangements for the Chair and Vice Chair at DHCW remain in place. We are liaising with Welsh Government colleagues to understand next steps and plans to appoint a substantive Chair.

4.2 Chair Meeting with Nick Elliott Welsh Government 28 November 2025, 6 January 2026

I continue to meet, along with the DHCW interim Vice Chair, with the Welsh Government Specialist Advisor for Digital on a regular basis. Discussions over the past few months have included the DHCW escalation status, the National Target Architecture work and work of the National Data Resource.

4.3 Chair meeting with Jacqueline Totterdell NHS Wales CEO, 2 December 2025

The NHS Wales Chief Executive / Director General for Health, Social Care and Early Years Group met with the Chairs Peer Group on the 2 December, as part of Jacqueline's induction. Discussions included the proposed work to develop an all Wales national Clinical Services Strategy.

4.4 Board Briefing – IMTP, 4 December 2025

The Board held a useful Board briefing session on the 4 December 2025, which focused on the structure, approach and make up of the IMTP for 2026/27. Work continues to develop the IMTP, and I look forward to seeing the final draft at the March SHA Board meeting for approval.

4.5 DHCW Board Development Session, 18 December 2025

The final Board Development session of 2025 concluded with a focus on DHCW's escalation areas of concern, and included feedback from work commissioned from an independent consultant, on international learning from global digital health economies, as well as the opportunities and challenges in the NHS Wales structure.



The session also involved Board members starting to shape the draft DHCW escalation plan for 2026.

4.6 Chair Peer Group meeting, 23 December 2025 and 27 January 2026

The Chair Peer Group has met twice since the last SHA Board meeting, and has considered the Workforce trends across NHS Wales presented by HEIW, in addition, the Peer Group received a helpful update on vaccinations, for which DHCW play a central role in supporting the vaccinations work through the Welsh Immunisation System (WIS).

4.7 Internal Audit 2026/27 Audit Planning, 7 January 2026/27

I met with Internal Audit colleagues to help inform the 2026/27 Internal Audit programme, taking a risk based approach. I'd like to thank Internal Audit for the engagement and discussion to help inform this programme for next year, which will go to the Audit and Assurance Committee in April for formal approval.

4.8 Board Briefing – NCSC Individual Cyber defence and DHCW Cyber update, 8 January 2026

The first Board briefing of 2026 was on the important topic of cyber security and resilience. DHCW were joined by partners from the National Cyber Security Centre (NCSC) to provide the Board with the latest global and UK threat landscape.

4.9 Public Accountability Meeting with the Cabinet Secretary and Minister 29 January 2026

Board members have started the year preparing for the Public Accountability Meeting to take place on 29 January. An evidence pack was submitted to Welsh Government ahead of the session, which provides an excellent summary of the breadth of work DHCW do, as well as the opportunities, challenges and risks faced by DHCW.

Interim Vice Chair:

4. Vice Chair meeting with Jacqueline Totterdell NHS Wales CEO 02/12

The Vice Chair Peer Group had an induction meeting with The NHS Wales CEO / Director General for Health, Social Care and Early Years Group. This provided useful context for Jacqueline's priorities and approach.

Vice Chair Peer Group Meeting 10 December 2025 and 14 January 2026

The Vice Chair Peer Group has met twice since the last SHA Board meeting, which has covered a number of topics, to include:

- An informative update on key developments in England's mental health network
- Welsh Government strategic mental health update
- The community by design program

All Wales IM Digital Network 14 January 2026

The IM Digital Network met on the 14 January, and covered three main topics, starting with an update on the NHS Wales digital blueprint work, which has been commissioned by the Chief Executives Peer Group. Secondly, the DHCW Senior Chief Security Officer attended the Network to update on cyber security resilience and posture across NHS Wales, with a theme of the importance of working collectively as one system to ensure resilience against the cyber threat. Finally, the group were updated on the work undertaken by DHCW as part of their escalation response to develop a DHCW major digital programmes typology, commercial framework and once for Wales assessment.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 Interim arrangements have been put in place until a substantive DHCW Chair has been appointed by the Cabinet Secretary.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS the Interim Chair and Interim Vice Chair Report.	



IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

CHIEF EXECUTIVE OFFICER REPORT

Eitem ar yr Agenda: Agenda Item:	4.2
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	2 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Helen Thomas, Chief Executive Officer
Paratowyd gan: Prepared By:	Laura Tolley, Deputy Board Secretary Head of Corporate Governance
Cyflwynwyd gan: Presented By:	Helen Thomas, Chief Executive Officer

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS the Chief Executive Officer Report; and ENDORSE DHCW's Digital Inclusion Action Plan.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	BS 10008 - Evidential Weight & Legally Admissible Information Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 27001	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Information
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement:	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling. Director of Corporate Affairs Board Secretary	January 2026	Reviewed
Helen Thomas, Chief Executive Officer	January 2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	IMTP	Integrated Medium-Term Plan
LIMS	Laboratory Information Management System	RISP	Radiology Information Systems Procurement
DDaT	Digital, Data and Technology		



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The purpose of this report is to keep [Board Members](#) up to date with key issues affecting the organisation since the last meeting.
- 3.2 The report has been informed by updates provided by members of the Executive team and highlights a number of areas of focus for the [Chief Executive Officer](#).

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 DHCW Escalation Status

Board members will be aware that on 11 March 2025, DHCW's escalation status changed from [Level 1 – Routine Monitoring, to Level 3 – Enhanced Monitoring](#). The increased escalation relates specifically to the delivery of major programmes, under the 'performance and outcomes' domain of the [NHS Oversight, Assurance, Escalation and Intervention Framework](#).

On 6 January 2026, I received [correspondence](#) from Jacqueline Totterdell, Chief Executive NHS Wales | Director General for Health, Social Care and Early Years providing feedback in relation to DHCW's escalation status, as following the Autumn tripartite meeting it was confirmed that the organisation remains at Level 3 – Enhanced Monitoring for performance and outcome related to the delivery of major programmes.

DHCW are continuing to work with Welsh Government on a revised Enhanced Monitoring Improvement Plan and are committed to working with our stakeholders to address the points included in the letter.

A detailed update on DHCW's Escalation Status will be provided by Senior Responsible Officer, Chris Darling, Director of Corporate Affairs | Board Secretary at item 6.1 of the agenda.

4.2 NHS Wales App

Significant work has been undertaken since the last Board meeting to deliver a view of referrals into secondary care and new appointment feature for citizens to view and track new appointments. This feature is now live in all seven Health Boards, my thanks to DHCW colleagues and our partners who continue to work collaboratively to deliver this important [Ministerial priority](#).

4.3 Quarterly Senior Leadership Team Day

On 22 January 2026 we held our Quarterly Senior Leadership Team in person at Ty Glan Yr Afon. It was great to see the enthusiasm and commitment from across the organisation as we looked at developing our IMTP, learning from escalation and focusing on values, culture and collaboration.

4.4 Connecting Care Programme Board

On 12 December 2025 and 9 January 2026, I chaired the Connecting Care Programme Board where we discussed the Development of Interoperability Standards for Primary, Community & Mental Health Services. The Programme Board also received the proposed discovery project to support compliance of the Mental Health Act by Health Boards and Professionals and noted

the work being undertaken in the Integrated Care Record Discovery.

4.5 Regional Working Digital & Data

I attended an in person Regional Working Digital & Data Meeting on 2 December 2025, where we collectively looked at the opportunities digital presents to enable regional working.

4.6 Staff Briefing

We held our annual in person Staff Briefing on 10 December 2026, it was fantastic to see so many people who had come together across the DHCW estate. During the briefing I shared my reflections and highlights of 2025 and discussed the organisational financial position, routine highlights from the work of Management Board, SHA Board and discussed other general staff updates. We finished the briefing with a festive quiz which was enjoyed by all. My thanks to all staff for their continued dedication, support and engagement.

4.7 NHS Wales Leadership Board

The NHS Wales Leadership Board have met twice since the last Board meeting. On 16 December we collectively discussed items including the NHS Wales Planning Framework and Accountability Framework. On 20 January 2026, it was my pleasure to present the NHS Wales Digital Blueprint work and discussed how as a system we could collectively think through our plans together. At both meetings the Leadership Board received routine finance and performance updates.

4.8 Chief Executive Management Team Meetings

The NHS Wales Chief Executive Management Team meetings were held on 2 December 2025 and 6 January 2026. We discussed a variety of topics relating to Digital including the Welsh Intensive Care Information System and Diagnostics (LIMS & RISP). The meetings also provided informative updates on Community by Design, Child Health Network and Education Strategy.

4.9 Esosia Search Engine

DHCW have recently approved the proposal to move its default search engine on all managed devices to Ecosia which is part of DHCW's ongoing commitment to sustainability and digital innovation. The change is designed to reduce DHCW's digital carbon footprint, promote eco-conscious practices across the organisation, in line with DHCW's Wellbeing Objectives and maintain a secure and privacy-focussed search experience for all users.

4.10 Digital Inclusion

It is my pleasure to share with the Board [DHCW's Digital Inclusion Action Plan](#) for endorsement, which sets out the direction for our work in this area for the next year, with the view to embed and fully embrace digital inclusion by 2029.

The work supports the delivery of our Duty of Quality through the development of digital inclusion benchmarking, whilst supporting our work to meet the Wellbeing of Future Generations (Wales) Act 2015, and a Healthier Wales.

Becoming a truly digitally inclusive organisation will ensure that DHCW products and services have the intended impact for the people of Wales and demonstrates our commitment to reducing digital health inequalities.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 DHCW is in Enhanced Monitoring (Level 3) under the escalation and intervention framework for NHS Wales, in relation to delivery of major programmes. An escalation update is included in the papers to ensure the Board is able to closely monitor improvement in the areas that have been escalated.
- 5.2 The new DDaT Governance arrangements are being established, at present the DDaT Leadership Board has met five times since its establishment in May 2025, with the sub-structure in the process of being established. The DDaT governance sub-structure will have important considerations and implications for DHCW’s reporting arrangements as part of this national digital governance framework.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS the Chief Executive Officer Report; and ENDORSE DHCW’s Digital Inclusion Action Plan.	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

STRATEGY ASSURANCE GROUP REPORT

Eitem ar yr Agenda:
Agenda Item:

5.1

Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW’N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Ifan Evans, Executive Director of Strategy
Paratowyd gan: Prepared By:	Bjorn Rodde, Strategy Directorate Manager
Cyflwynwyd gan: Presented By:	Ifan Evans, Executive Director of Strategy

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE and DISCUSS this Report APPROVE the refreshed People Strategy (Appendix 1) NOTE the Communications Strategy update (Appendix 2) NOTE the Clinical Informatics and Business Change Strategy update (Appendix 3)	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	N/A
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: Not required	



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2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Strategy Assurance Group	08/01/2026	Approved
Ifan Evans, Executive Director of Strategy	09/01/2026	Approved
Management Board	15/01/2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IMTP	Integrated Medium Term Plan	HEIW	Health Education & Improvement Wales
EDI	Equality, Diversity & Inclusion	HWB	Health & Wellbeing
CIPD	Chartered Institute of Personnel & Development	BCS	British Computer Society
FedIP	Federation of Informatics Professionals	R&I	Research & Innovation

OKR	Objectives and Key Results	KPI	Key Performance Indicator
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3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The Strategy Assurance Group has been established to fulfil three purposes:
- To report on the delivery of the organisational strategy, and progress against the organisations' strategic objectives;
 - To review existing strategies, sub-strategies and strategic plans, assuring progress against their objectives, aims and priorities, and to ensure they remain updated, relevant and proportionate;
 - To assure new strategies prior to them being submitted to Management Board, ensuring new sub-strategies and strategic plans are aligned to the organisational strategy, and that they use consistent language and terminologies.
- 3.2 The Strategy Assurance Group has now been in place for 12 months, and all existing Strategies have reported at least once to the DHCW Management Board.
- 3.3 The Strategy Assurance Group provides a regular update to SHA Board every six months to provide overall assurance. New and refreshed strategies may also be submitted to SHA Board for approval as they are developed.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 This report contains progress updates on 5 sub-strategies, which are:
- People Strategy
 - Environmental Strategy
 - Bilingual Skills Strategy
 - Research and Innovation Strategy
 - Quality Strategy

People Strategy – Appendix 1

The refreshed [People Strategy](#) for DHCW has been developed to align with organisational objectives, statutory requirements, and the evolving needs of the workforce. The update is informed by feedback from staff surveys, recent workshops, and best practice research, with a particular focus on well-being, inclusion, and adaptability. The strategy aims to support high-quality, person-centred care and services, ensuring the workforce is skilled, engaged, and supported. The refresh of this sub-strategy has been completed during the period.

The People strategy was consulted upon by the Strategy Assurance Group, P&OD Team, union colleagues, EDI and HWB Networks, and wider stakeholders, including HEIW, BCS, FedIP and the Local Partnership Forum. The development of the refreshed strategy also utilized resources from the CIPD and Gartner. An Equality Impact Assessment (EQIA) has also been completed for the new strategy.



The People Sub-Strategy has been assured by the Strategy Assurance Group and approved by Management Board, and is presented to the SHA Board for approval.

Environmental Strategy

The draft Environmental Strategy aligns with internal policies and Mission 5 of the organisation's strategic objectives. The strategy requires final editing to ensure consistency with other corporate strategy documents and to clearly demonstrate alignment with all five strategic objectives in Mission 5 prior to being submitted for approval to Management Board and onwards to SHA Board.

It is noted that the timing of the submission of this strategy for approval aligns with the development of the 2026–29 IMTP. Once approved, the strategy should be referenced in relevant assurance and audit documentation and a communications plan developed to raise awareness and support its implementation across the organisation.

An initial review at the Strategy Assurance Group in January 2026 has requested further work to consider whether a strategy is needed, given that actions are mainly compliance to a framework, ISO standards, and policies and processes. For comparison, please note (below) the recommendation that a Quality Strategy is not needed, because of the strength of quality framework, policies and processes.

Bilingual Skills Strategy

DHCW is preparing for the introduction of new Welsh Language Standards, with expected commencement by Welsh Government in April 2026. These standards will replace the current Welsh Language Scheme (2022–25), requiring public bodies to treat Welsh no less favourably than English in all aspects of service delivery, policy-making, and operations. The DHCW Welsh Language Team has undertaken a review of the draft standards (received by DHCW in October 2025) to identify how they differ from the current Welsh Language Scheme, which has driven the updates to the Bilingual Skills Strategy to ensure ongoing compliance. The organisation aims to align these revisions with its broader strategic objectives and the IMTP for 2026–29.

It is currently planned that the Bilingual Skills Strategy will be submitted to SHA Board in March 2026, in time for the new standards to be enacted in April 2026.

An initial review at the Strategy Assurance Group has raised two areas for further work: wider engagement and consultation with DHCW staff as part of the development of the refreshed strategy; and review of ambition noting that Welsh-speaking ability in the DHCW workforce (16%) is less than the population level across Wales (20%), compared to our approach, ambition and position on achieving the Workforce Race Equality Standard (DHCW 13% BME Staff, Wales 10%).

Research and Innovation Strategy

The refreshed Research & Innovation (R&I) Strategy aims to build on achievements since 2022 by focusing on leveraging data and digital innovation to improve health outcomes in Wales. The vision is to lead and enable high-quality, impactful research and innovation, empowering healthier lives.

The redevelopment process for the strategy has involved a series of alignment meetings with key staff and stakeholders, internal reviews, and feedback loops with various groups. Key recommendations include collaborating with SAIL partners, expanding participation in clinical trials, publishing

comprehensive data resources, and achieving relevant accreditations. The strategy also calls for establishing a dedicated R&I 'front door', developing a digital impact dashboard, formalising commercial partnerships, and enhancing knowledge management through restructuring and annual conferences. Delivery and monitoring will be integrated into the IMTP, with progress tracked through internal governance and annual reporting to inform future strategy.

The revision of the R&I Strategy remains on track with timeline reported previously (no new update required as part of this report). It was considered by the membership of the Strategy Assurance Group in January 2026. It is currently planned that the refreshed R&I Strategy will be submitted to SHA Board for approval in March 2026.

Quality Strategy

DHCW has been considering the development of a Quality Strategy (2026-2029), following on from the recent approval of the Quality Framework.

The DHCW Quality Framework was developed to provide a structured approach to enhancing the quality of products and services in line with the organisation's strategic missions. It specifically addresses the regulatory requirements of the Duty of Quality under the Health and Social Care (Quality and Engagement) (Wales) Act 2020. The Framework has already undergone a rigorous approval process, receiving sign-off from the Management Board (July 2025), the Audit & Assurance Committee (October 2025), and the SHA Board (November 2025).

Reviewing the extent of the recently published Quality Framework, and following advice from Corporate Governance and the Strategy Assurance Group, it has been determined that an overarching Quality Strategy document is not required to satisfy the organisation's standing orders or its strategic direction in terms of quality improvement. The Quality Strategy has therefore been removed from the Strategy Assurance Group's Forward Workplan.

4.2 This report contains Annual Progress Reports on 2 sub-strategies, which are:

- [Communications Strategy](#)
- [Clinical Informatics and Business Change Strategy](#)

Communications Strategy – Appendix 2

Since the approval of the Communications Strategy, the Communications Team has focused its resources on delivering the strategy's supporting action plans for years one and two. Progress has been summarised under each of the 5 objectives of the Communications Strategy:

1. Establish DHCW's reputation as a trusted strategic partner

The Communications Team has implemented consistent corporate messaging and developed a central repository for staff, ensuring alignment and clarity in how DHCW's role is communicated. Proactive media engagement, regular updates to Welsh Government, and support for stakeholder reviews have strengthened DHCW's profile. The team has also taken on line management of programme communications leads, developed a work package model for agile delivery, and secured high-profile speaking opportunities for senior leaders.

2. Build on our internal communications



Efforts have focused on providing staff with timely, relevant information through multiple channels, regular evaluation, and a strategic review of internal communications. The team has delivered events to support wellbeing and engagement, enhanced digital platforms like SharePoint and newsletters, and increased opportunities for staff to connect, including hybrid conferences and staff awards. Initiatives such as TENTalks, Spotlight sessions, and the Behind the Screens blog have fostered a more inclusive and people-focused culture, while bilingual content and collaboration with POD have further supported staff engagement.

3. Develop our stakeholder communications

The team has worked closely with the Engagement Team to address stakeholder review recommendations, with most communications-related actions completed. Improvements include a strengthened stakeholder newsletter, better materials explaining DHCW's role, and enhanced collaboration with stakeholders. Regular meetings, strategic event planning, and participation in national communications groups have fostered joined-up approaches. The launch of webinars, conferences, and explainer videos, along with expanded feedback mechanisms, have improved stakeholder understanding and engagement.

4. Grow our public communications

Messaging has been adapted to better explain the benefits of DHCW's systems and services to clinicians and the public, supported by explainer videos and a strong presence at events like the Eisteddfod. Collaboration with NHS Wales and partners has amplified joint communications, while social media engagement has reached record levels, particularly on LinkedIn. The team has also supported recruitment drives, built relationships with Llais, and launched public-facing digital services, with ongoing evaluation ensuring continuous improvement of public communications.

5. Enhance our digital communications

The Communications Team has prioritized upskilling in digital content creation, established a dedicated digital communications role, and regularly evaluates digital channel performance. Improvements to SharePoint and the website, increased bilingual content, and horizon scanning for best practices have kept DHCW at the forefront of digital communications. The team has also delivered training on digital best practices, achieved record engagement across social channels, and begun exploring AI tools to further enhance communications delivery.

Appendix 6 also outlines the key priorities for the Communications Team for the next 6 months.

Clinical Informatics and Business Change Strategy – Appendix 3

During year 2 of the delivery against the Clinical Informatics and Business Change Strategy, the Clinical Informatics (CI) and Business Change (BC) teams demonstrated strong progress despite facing significant challenges, including the funding from WG ceasing for the Digital Change Delivery Network and the subsequent closure of the initiative. By realigning their focus on IMTP-aligned milestones, particularly under Aims 1 and 2 of the strategy, both teams improved their delivery performance and organisational readiness for a shift towards a product- and service-based operating model. Achievements included enhanced clinical advice processes, increased leadership visibility, and ongoing support for national health programmes, despite business change activity taking a temporary dip due to resource constraints and organisational change processes underway.

The strategy's 4 core aims – maximizing support for health and care, adopting a quality approach, investing in people through a learning hub, and accelerating digital transformation – guided the teams'

efforts. Year 2 saw notable progress in standardising clinical informatics practices, strengthening professional development, and embedding agile ways of working. The teams also advanced their engagement with national partners, contributed to the development of clinical frameworks, and supported the adoption of digital health products across Wales. The impact of the closure of DCDN had a particular impact on the learning and transformation milestones, resulting in change controls and milestone closures.

Looking ahead, the report highlights a focus on maturing the CI and BC operating models to align fully with DHCW’s product-centric structure. Priorities for the coming year include improving resource planning and reporting, expanding capability frameworks, and enhancing national collaboration, especially around clinical engagement and assurance. The teams aim to consolidate gains, close remaining gaps, and accelerate their impact across the health and care system, setting the scene for the refresh of this strategy in 2026/27.

Strategic Objectives: Definitions, KPIs and OKRs

It was proposed to the SHA Board in their Development Day in October 2025 that DHCW’s Organisational Strategy remains relevant and appropriate, but that some work could be done to create a definition for each of the 20 strategic objectives – to prevent any potential ambiguity of their meaning – and identify KPIs/OKRs to be used to monitor delivery of the strategy. This position was agreed by the Board and the constituent parts of 7 of the strategic objectives were discussed with the Board during the Development Day to commence this work, along with the agreement to complete this work in time for discussion at the SHA Board Development Day in February 2026.

This work has now been largely completed with each strategic objective having a draft definition and no more than two KPIs/OKRs proposed for each to facilitate progress monitoring. A draft has been shared with the Organisational Performance Team and was discussed at high level at the December 2025 and January 2026 meetings of the Strategy Assurance Group.

The definitions, KPIs and OKRs will now be reviewed by the Strategy Assurance Group and other key staff in DHCW for feedback/refinement prior the discussion and the February 2026 SHA Board Development Day. It is planned that the definitions, KPIs and OKRs will be submitted to SHA Board in March 2026 for approval.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no key risks / matters for escalation to the Board.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE and DISCUSS this Report APPROVE the refreshed People Strategy (Appendix 1) NOTE the Communications Strategy update (Appendix 2) NOTE the Clinical Informatics and Business Change Strategy update (Appendix 3)	



IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

IMTP 2026-29 PROGRESS UPDATE

Eitem ar yr Agenda: Agenda Item:	5.2
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	2 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Ifan Evans, Executive Director of Strategy
Paratowyd gan: Prepared By:	Michelle Sell, Director of Programmes and Engagement
Cyflwynwyd gan: Presented By:	Ifan Evans, Executive Director of Strategy

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS progress on the IMTP 2026-29.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Whole Systems Approach
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Choose an item.
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement:	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Michelle Sell, Director of Programmes & Engagement	08/01/26	Approved
Ifan Evans, Executive Director of Strategy	09/01/26	Approved
DHCW Management Board	15/01/26	Discussed

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IMTP	Integrated Medium Term Plan		



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 This document updates the Board on progress of the Integrated Medium-Term Plan (IMTP) development cycle for 2026-2029.
- 3.2 The Welsh Government determines the priorities, timing and general format of the IMTP, and issued guidance via a Planning Framework document received 19th December 2025. The submission date to Welsh Government is 31st March 2026.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 The main activity over the last month has been to review and agree a path to finalising the content of the IMTP, and reshaping Mission 5 to simplify and enhance key messages related to people and partnerships.
- 4.2 **Structure.** Board members will be aware through engagement, DHCW have made small changes to how portfolios are organised into missions, and we now have 16 Portfolios in Missions 1-4 (up from 14 last year). The changes were discussed at an SHA Board development session in December, with a steer from Board Members to further simplify the IMTP and to reduce the number of milestones, alongside clear narrative describing policy context, deliverables and value outcomes.
- 4.3 Mission 5 has been restructured to focus on two portfolios - *People & Culture, Partnerships & Engagement*. The IMTP will also include dedicated sections covering Finance and our Legal and Statutory Obligations.
- 4.4 A small number of milestones will be developed for Mission 5 to demonstrate how we will deliver our ambitions for People and Partnerships. No specific milestones will be included for the Finance, Legal, or Statutory Obligations sections, reflecting their ongoing and mandatory nature.
- 4.5 The reshaping of Mission 5 was discussed at the Executive Directors session on 7 January 2026 and has been jointly led by the Executive Director of Finance and the Director of People and Organisational Development. Finalisation is planned by end of January 2026.
- 4.6 **Portfolios.** All Portfolio workshops have now taken place and drafting has been completed. In December 2025, the Executive Director of Strategy commissioned a review of the IMTP, with a submission deadline of 9 January 2026. Mission Leads and Portfolio Leads, as detailed in [Appendix 1](#), have been tasked with reviewing, simplifying, and consolidating the milestones within the IMTP to ensure they reflect key priorities

and are realistic and SMART in their definition.

- 4.7 Portfolio objectives have been mapped to DHCW strategic objectives and presented to the Strategy Assurance Group for assurance.

Introductory slides in the IMTP have been reviewed and updated with a number to be drafted following finalisation of the portfolio sections.

Artificial Intelligence. An assessment has been undertaken to summarise references to AI throughout the IMTP which was provided to the Executive team for review as part of the Executive Directors Strategic Session in November. This work has been further reviewed across the organisation with the support of the AI Steering Group.

NHS Wales Planning Framework. The NHS Wales Planning Framework was issued on 19 December 2025. The Cabinet Secretary's three-year strategic priorities remain broadly consistent, with strengthened emphasis on quality and safety, primary care, and a shift toward population health management and prevention. The key priorities are:

- Timely Access to Care
- Population Health and Prevention
- Community by Design
- Mental Health Access
- Women's Health
- Quality and Safety

The framework is supported by a Delivery and Enabling annex that sets out clear expectations from Welsh Government. These have been shared with Portfolio Leads to ensure alignment with national priorities.

An assessment has been undertaken to review how well the existing Portfolios reflect these priorities and to identify any gaps. The findings will inform the next stage of review and finalisation of the IMTP. [Appendix 2](#) outlines the IMTP timeline for completion.

Remit letter. We anticipate DHCW's Remit Letter to be formally issued within the coming weeks and we are liaising with Welsh Government to ensure we are ready for this when it is formally published.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 If DHCW's remit letter is delayed, then we will be unable to make significant amendments to the IMTP ahead of submission, which would result in a review and agreement of changes to milestones and deliverables in the submitted IMTP.



5.2 The final draft of the IMTP will be presented to the Board in March for approval prior to submission to Welsh Government by 31 March 2026.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS progress on the IMTP 2026-29.	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

NATIONAL TARGET ARCHITECTURE

Eitem ar yr Agenda: Agenda Item:	5.3
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Ifan Evans, Executive Director of Strategy
Paratowyd gan: Prepared By:	Alex Percival, Head of Planned Care Programmes
Cyflwynwyd gan: Presented By:	Ifan Evans, Executive Director of Strategy

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE for ASSURANCE the National Target Architecture Update.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Whole Systems Approach
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: Not required at this stage, however future elements of NTA delivery may be subject to an EQIA	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Management Board	15 January 2026	Approved
Ifan Evans	20 January 2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
NTA	National Target Architecture		



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The National Target Architecture project was established in June 2025, with the following high-level objectives:
- Develop a comprehensive and shared understanding of the current digital health and care architecture across NHS Wales.
 - Co-design potential target state digital architectures that align with the "A Healthier Wales" vision.
 - Co-design agile 10-year delivery roadmaps for the agreed target state architecture options.
 - Co-design a draft strategic investment plan, describing at a high level options for the long-term investment in the national architecture.
 - Establish governance and assurance processes for the ongoing development and maintenance of the national health and care architecture.
- 3.2 To support this, DHCW have procured an all-Wales enterprise architecture mapping solution so that key information about all systems used across NHS Wales can be stored within a single repository. This ensures that linkages and dependencies can be mapped and understood at local and national levels, so that ongoing assessment of the technical and strategic fit of those systems can be undertaken.
- 3.3 In May 2025, DHCW commissioned an external supplier to support the collation of technical data, develop and agree key architectural principles with stakeholders and produce a detailed current state report, providing an assessment against the architectural principles. Once this was completed, the supplier then focused on the delivery of a proposed target state for the National Target Architecture. This work was completed in October 2025.
- 3.4 A National Target Architecture Community of Practice, made up of architects from across NHS Wales was established in June 2025. The Community of Practice has supported work on current and target state architecture development, onboarding of all organisations to the all-Wales enterprise architecture solution, and assurance of architecture principles and common approaches. There has been a high level of engagement and strong partnership working through the Community of Practice, which has been a notable feature of the national target architecture work.
- 3.5 This report provides a high-level overview of the reports on current state and target state architecture, and describes next steps for Project delivery.



4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 Current State Assessment

The Current State Assessment was completed in September 2025. It used information from a current state mapping exercise between July and August 2025 to provide a point in time snapshot of how well NHS Wales' digital architecture reflects its aspirations agreed in the Architectural Principles. In doing this, the report assessed over 1400 individual current systems in use across NHS Wales, which reflects significant duplication of effort and capability and suggests that there is an opportunity to reduce the total number of systems in use across Wales.

4.2 As expected, the Current State Assessment Report concluded that NHS Wales was not currently aligned to national architecture principles, which are forward looking and are intended to guide current and future architecture design decisions. The Report also evidenced our understanding of key issues including fragmentation of data, duplication of digital capabilities, and the complexity of integrations between systems. Key recommendations from this first Report on current state architecture included continued use of a single enterprise architecture solution across NHS Wales, and further investment in the architecture profession to enable more detailed and comprehensive information to be stored in the shared repository. The Report also identified potential areas for action in order to align to the architecture principles.

4.3 Target State Report

Following completion of the Current State Assessment, a draft Target State Report was developed, through a co-design and engagement process through September and October. This report set out an initial target state architecture design, at the all-Wales level, with both local and national services in scope. The Report also included phased road maps setting out options on how NHS Wales could transition from current to target state, with a high-level analysis of the relative complexity of each roadmap deliverable. The report focused on aspects of the application, logic, data and technology layer and identified key priorities and immediate next steps for focus.

Next Steps

4.4 Agreed Target State

Building on the draft Target State Report delivered by the supplier, the National Target Architecture team have continued to work with stakeholders across NHS Wales to assure the target state design and roadmap options. A co-designed approach which is supported by all partners will ensure a shared understanding and increase confidence of delivery. This work has made good progress supported by the Community of Practice, Digital Directors Peer Group, Project Board, and several thematic Task & Finish Groups. The revised target state design and roadmaps will inform development of the high level Strategic Investment Plan, and strategic decision making around digital

priorities, through national governance arrangements.

4.5 Strategic Investment Plan

The National Target Architecture Team are working with the supplier to develop a Strategic Investment Plan which will set out the potential costs of delivering the target architecture, over a ten-year period. The Strategic Investment Plan is not intended to be a Strategic Outline Case or detailed business case suitable for making investment decisions. It will set out a high-level roadmap for consideration by senior decision-makers, supporting the strategic alignment and sequencing of future investment decisions. It is anticipated that digital investment will be underpinned by individual business cases which will set out scope, risks, costs and benefits associated with any investment in more detail. Each business case would be assured and assessed through regular governance processes and decision making arrangements.

4.6 Ongoing Engagement

A major success of the National Target Architecture Programme so far has been the significant engagement with stakeholders across NHS Wales, with every organisation providing input, feedback and challenge during the delivery of the Current State Assessment and Target State Report.

The National Target Architecture team will continue this engagement to support the successful delivery of an Agreed Target State and Strategic Investment Plan.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no key risks / matters for escalation.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE for ASSURANCE the National Target Architecture Update.	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

PROGRAMME TYPOLOGY & DHCW PLAYBOOK

Eitem ar yr Agenda: Agenda Item:	5.4
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Ifan Evans, Executive Director of Strategy
Paratowyd gan: Prepared By:	Michelle Sell, Director of Programmes & Engagement
Cyflwynwyd gan: Presented By:	Ifan Evans, Executive Director of Strategy

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the Programme Typology & DHCW Playbook.	



1 ASESIAD O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	N/A
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Choose an item.
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAD O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement:	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below A clearer approach and informed Programme design decisions should improve outcomes.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below A clearer approach and informed Contract design decisions should improve outcomes.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below A clearer approach and informed Programme and Contract design decisions should improve outcomes.
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Ifan Evans	January 2026	Approved



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 DHCW currently leads, and has historically led, a number of large-scale national digital transformation programmes on behalf of NHS Wales. These Programmes are each different in their own way, in terms of their governance and commercial arrangements, as historically there has not been any typology or template to guide programme design.
- 3.2 Drawing on what we are managing now, we have developed and shared with Welsh Government a framework that defines 3 types of programme, key contractual approaches and a model or framework to determine the most appropriate approach led by the architectural objectives set out by Welsh Government in the 'Once for Wales' requirements.
- 3.3 In developing this model, we have considered feedback from a range of sources including external gateway reviews, audits and Programme lessons learned reviews as well as input from Commercial and Programme Leads and the Programme Management Office within DHCW.

Through the use of this framework and more informed design decisions for our future programmes it is anticipated that we will:

- Establish a common language for describing and designing programmes.
 - Ensure the right governance, assurance, and delivery approach is applied to each type of work.
 - Improve transparency for NHS Wales partners and Welsh Government.
 - Enable better alignment and more effective delivery against Welsh Governments 'Once for Wales' Objectives.
- 3.4 The typology and framework have been shared with Welsh Government, Health Board and Trust Directors of Digital and the Independent Member Digital Network. Advice has also been provided by independent experts, as part of wider work to develop a 'Digital Blueprint' for NHS Wales.
- 3.5 It is anticipated that in the future this framework will be used as the model to develop new Programmes and will be reflected in the DHCW Programme Playbook and supported by a Commercial Playbook also now in development.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 Adopting the proposed approach will require strong alignment between Welsh Government, DHCW and Senior Leaders across NHS Wales and clear direction on the 'Once for Wales' objective into the proposed investment.
- 4.2 Board Members are asked to note that adoption of the framework will not in itself address all of the current programme delivery challenges. Consideration of the caveats and dependencies, included at a high level in the document attached, will also be important.
- 4.3 The typology and framework shows that achieving the highest Once for Wales tier will require DHCW to contract on behalf of NHS Wales – as we do for example in the LIMS2.0 collaborative programme – and to take on the associated commercial risks. Strong



governance and commitment from all parties is key in this model and it will be important that this is secured at the initiation stage of future programmes of this type.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no key risks / matters for escalation.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

SHA Board is being asked to

NOTE the Programme Typology & DHCW Playbook.

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

ESCALATION STATUS UPDATE

Eitem ar yr Agenda: Agenda Item:	6.1
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Helen Thomas, Chief Executive Officer
Paratowyd gan: Prepared By:	Chris Darling, Director of Corporate Affairs / Board Secretary
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs / Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE for ASSURANCE the Escalation Status Update; and NOTE the escalation feedback provided by Welsh Government in January 2026.	

1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL	All missions apply
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STRATEGIC MISSION	
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	ISO 27001 - Information Security Management Systems
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAD O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Helen Thomas, CEO	Oct 2025	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DDaT	Digital, data, and technology	SRO	Senior Responsible Owner
LIMS	Laboratory Information Management System	RISP	Radiology Information System Procurement
DSPP	Digital Services for Patients and the Public	PDC	DHCW Programmes Delivery Committee
JDCA	Joint Data Controller Agreement	PMO	Programme Management Office



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 On 11 March 2025, DHCW's escalation status changed from [Level 1 – Routine Monitoring, to Level 3 – Enhanced Monitoring](#).
- 3.2 The increased escalation relates specifically to the delivery of major programmes, under the 'performance and outcomes' domain of the [NHS Oversight, Assurance, Escalation and Intervention Framework](#).
- 3.3 DHCW have worked closely with Welsh Government to confirm the arrangements for escalation via an agreed [Escalation Framework](#) and associated Enhanced Monitoring Improvement Plan to be monitored to inform the future escalation status.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 DHCW Escalation Activity

Since the last Management Board meeting members of DHCW attended the Welsh Government Integrated Quality, Performance and Delivery (IQPD) meeting held on 3 December 2025. A revised approach to the IQPD meeting was undertaken by Welsh Government.

Discussion points of note from the 3 December 2025 IQPD:

- Comment on the status of JDCAs and how to ensure data flows into the NDR and the role WG could play.
- NHS Wales App – discussion on the status of Cardiff and Vale UHB publishing appointments and referrals from their PMS system in the NHS Wales App.
- Integrated Care Business Case – milestone delivery.
- LIMS and RISP – the current status of these programmes was discussed, the level of risk and concerns, particularly in relation to blood transfusion.

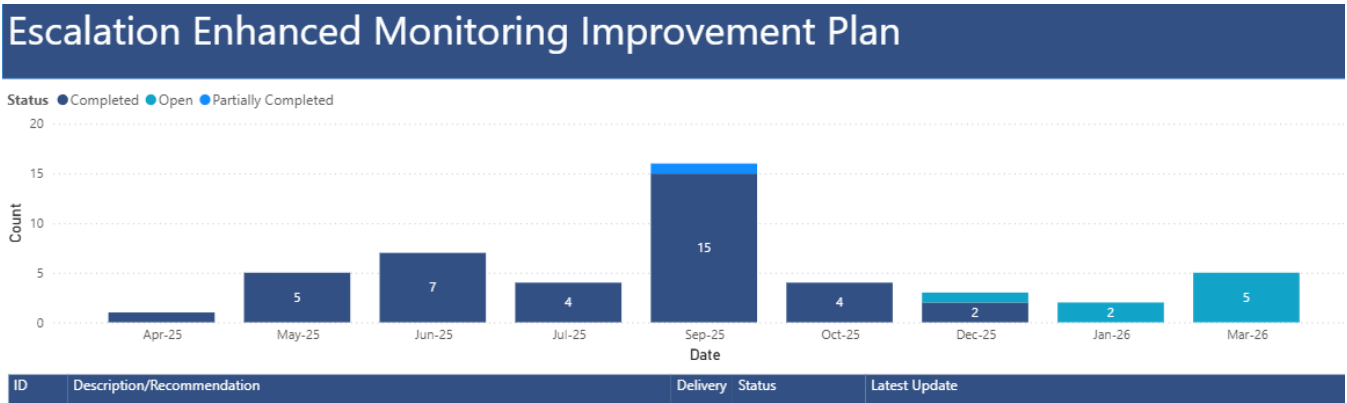
In addition to the IQPD meeting, the CEMT meeting held on the 2 December included a DHCW digital update, which included updates on major programmes – Intensive Care, Diagnostics – LIMS and RISP.

In addition, the first DDaT Delivery Board is scheduled for the 10 December and again on 13 January. The DDaT Leadership Board in January 2026 has been deferred to February.

The DHCW Audit and Assurance Committee considered the approach taken in response to escalation on the 20 January 2026.

4.2 Enhanced Monitoring Improvement Plan

The SHA Board has assigned the Programmes Delivery Committee to oversee delivery of the [Enhanced Monitoring Improvement Plan](#), which sets out DHCW’s response to the areas of concern/escalation and the proposed milestones and actions against the de-escalation criteria to demonstrate the required improvement. A shared information repository has been developed between DHCW and Welsh Government, to allow a transparent approach to tracking milestone delivery, with each milestone broken down by month. The repository also allows evidence to be uploaded, to show the evidence/outputs/outcomes that demonstrate the milestone has been completed. The distribution of milestone delivery over time can be seen below:



At the time of writing, the plan sets out 40 milestones to be delivered between April and the end of December 2025, with 39 delivered and one not delivered (5.3 All organisations in the LIMS Programme migrated to LIMS). However, it should be noted five were delivered after their target dates, these were: 4.1 NHS bodies entering into the WASPI Joint Data Controller Agreement – due for delivery by the end of July but delivered at the end of September 2025, 9.1 Colposcopy go-live – due for delivery by the end of June but delivered on 9 July 2025, 1.5 National Target Architecture – current and future state mapped by end of September 2025, the current state was complete by end of September 2025 but the future state mapping was completed at the end of October 2025, approved by the Project Board, 2.2 Q1/Q2 features as per ‘silver’ road map – the NHS Wales App secondary care new appointments feature was not live in all Health Board areas until 8 January 2026.

4.3 Board Oversight and Next Steps

The DHCW Board Development Day on the 18 December focused on areas of work commissioned since going into Enhanced Monitoring for the delivery of major programmes. This will include learning from international practice and ways of work in other digital health economies across the world. As well as understanding the opportunities, challenges and system learning from DHCW escalation relating to delivery of major programmes and digital transformation in NHS Wales. The session also

considered the progress made on stakeholder engagement (de-escalation criteria) and the approach and impact this is having.

4.4 Escalation Status – December 2025 and Feedback January 2026

On the 16 December 2025, the Cabinet Secretary confirmed that the escalation status for DHCW following the tri-partite discussions in November 2025 had not changed DHCW's escalation status and it remained at Level 3, Enhanced Monitoring for Major Programme delivery.

On the 6 January 2026, [the Director General for Health and Social Care / NHS Wales CEO wrote to DHCW](#) to provide feedback on the continuity of its escalations status for major programmes, feedback included:

- Progress made against the escalation milestones – not translating into the level of change, improvement and transparency that WG expected
- Escalation framework is too transactional
- Focus needs to be on system leadership, engagement, stakeholder perceptions, programme planning/reporting
- There is a perception that risks and failure to deliver milestones are not being reported and escalation to WG in a timely and transparent manner
- DHCW must focus efforts to change stakeholder perceptions, and this will be aided by delivering on your core priorities
- Needs to be greater scrutiny and objective assurance in relation to programme delivery, risk and engagement
- As system leaders, you need to look beyond your own organisations and guide the health and care system across Wales in adopting appropriate digital solutions, including system oversight on those programs that you are not leading upon.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 DHCW has been put into Level 3 – Enhanced Monitoring for escalation in relation to delivery of major programmes. For the majority of major programmes included within DHCW's Escalation Framework, working in partnership with other Health Bodies and wider partners is essential for successful delivery, and as such the Enhanced Monitoring Improvement Plan has a 'dependencies' column to ensure if action is required by a partner to achieve a milestone this is documented and tracked as part of the improvement plan.
- 5.2 The DHCW Board must ensure they continue to provide sufficient oversight and scrutiny of all areas of DHCW business. Major programmes account for circa 20% of DHCW's investment annually and therefore ensuring continued assurance of digital product and service delivery will be vital whilst also ensuring enhanced scrutiny on major programme delivery.



GIG
CYMRU
NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

Management Board is being asked to

NOTE for **ASSURANCE** the Escalation Status Update; and
NOTE the escalation feedback provided by Welsh Government in January 2026

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

FINANCIAL REPORT FOR THE PERIOD END 31 DECEMBER 2025

Eitem ar yr Agenda: Agenda Item:	6.2
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Claire Osmundsen-Little, Executive Director of Finance
Paratowyd gan: Prepared By:	Sian Williams, Head of Financial Services and Reporting
Cyflwynwyd gan: Presented By:	Claire Osmundsen-Little, Executive Director of Finance

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS the contents of the financial report for December 31st, the forecast achievement of financial targets and to NOTE the Financial plan 2026/27 timeline and approach.	



1 ASESIAD O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Whole Systems Approach
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAD O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement:	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
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2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Claire Osmundsen-Little	January 2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
SLA	Service Level Agreement	PSPP	Public Sector Payment Policy
DSPP	Digital Services for Patients & Public	NDR	National Data Resource
VAT	Value Added Tax	HMRC	His Majesty's Revenue & Customs



IM&T	Information Management & Technology	LIMS	Laboratory Information Management Solution
CRL	Capital Resource Limit	WCCIS	Welsh Community Care Information System
IMTP	Integrated Medium-Term Plan	BAU	Business as Usual
LHB	Local Health Board	WHC	Welsh Health Circular
WICIS	Welsh Intensive Care Information System	DIPF	Digital Investment Portfolio Fund

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 Financial Performance

The purpose of this [report and presentation](#) is to present DHCWs financial performance against annual plans and issues to December 31st 2025. It also assesses the key financial projections, risks and opportunities.

DHCW receives funding to support the below main activities:

1. Ongoing provision of core services via Welsh Government & NHS organisation's (which is delegated to directorate budgets).
2. Welsh Government National Priorities Fund (previously DPIF) allocations to support discrete development and implementation programmes & projects.

DHCW is required by statutory provision not to breach its financial duty (to secure that its expenditure does not exceed the aggregate of its resource allocations and income received). This duty applies to both capital and revenue resource allocations. In terms of key Organisational financial performance indicators, they can be brigaded as follows:

The two key statutory financial duties are:

- To remain within its Revenue Resource Limit
- To remain within its Capital Resource Limit

Additional financial targets are:

- **Public Sector Payment Policy (PSPP):** The objective for the organisation All NHS Wales bodies are required to pay their non-NHS creditors in accordance with HM Treasury's public sector payment compliance target. This target is to pay 95% of non-NHS creditors within 30 days of receipt of goods or a valid invoice (whichever is the later) unless other payment terms have been agreed with the supplier.
- **Cash:** Manage residual year end balances to a maximum of £2m.



4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 2025/26 Financial Performance Overview

4.1.1 Overview: DHCW is forecasting a balanced position at year end subject to successful achievement of savings plans and risk mitigations.

4.1.2 Revenue: A small revenue underspend of **£0.192m** is being reported for the period.

4.1.3 PSPP: The Public Sector Payment Policy (PSPP) target has been exceeded with 98% of non NHS invoices being paid within 30 days.

4.1.4 Cash: DHCW has a cash balance of £0.416m at the 31st December. DHCW have actively paid a number of NHS invoices to aid with the Agreement of Balances process in January. DHCW is forecast to have a cash balance of just under £2m at the end of the year in line with the allowance.

4.1.5 National Priorities Fund: DHCW has recorded £21.230m cumulative revenue spend to date. The Annual National Priorities (formally DPIF) budget includes £29.885m from Welsh Government funded and £1.379m NHS Wales funded.

4.1.6 Capital: Spend to December totals £6.215m spend for the period against a capital limit of £12.821m.

4.1.7 Underlying Position: The "underlying deficit" describes the gap between the recurrent funding DHCW receives and the recurrent cost of delivering its services, after accounting for non-recurrent funding boosts or one-off savings. With the focus very much being on identifying and delivering recurrent savings and efficiencies we have been able to reduce the underlying deficit from £2.7m to £0.9m with a projected year end position of £0.4m.

4.1.8 Savings: The IMTP presented a gross savings requirement of £4.9m. As per WHC 2025 013, the savings updates will only reflect schemes where management action is required to deliver cash releasing savings - with £1.5m recurrent schemes already being identified during 2024/25 and realised in 2025/26 by applying to allocated budgets a net target of £3.4m remains. As at the reporting date the forecast savings for the year amounts to £3.6m (an overachievement of £0.2m) of savings target identified of which £3.4m is recurrent.

Further savings opportunities have been identified to be included within the 2026/27 financial plan and IMTP as follows:

- o Data Integration hub development resulting in a reduced 3rd party requirement.



- Implementation of the Single Record product road map providing efficiency gains through product simplification.
- Cloud migration.
- Organisational transformation and shift to a product centric & agile delivery operating model.

4.2 Developments Since November board

4.2.1 Additional Funding: The below items were allocated from Welsh Government to the Capital Resource Limits.

- Upgrade of AV equipment in Innovation Room – £0.045m,
- Upgrade of WIFI at TGA – £0.067m and
- Upgrade of AV equipment in TGA Boardroom – £0.050m in January not yet in CRL

The below revenue items were received in month

- Women's Health hub phase 1 letter £59K received August, and Phase 2 received and returned the funding letter in December £55K.

4.2.2 Cost Pressures: DHCW is currently providing "bridging" funding to support activity for 2025/26 requirements, including:

- GP Migrations – £1.6m
- VAT interest on the protective assessment letters received from HMRC of £0.852m

4.2.3 Financial Sustainability: DHCW continues to liaise with Welsh Government digital leads regarding long term sustainable funding requirement and efficiency targets over the medium term. Whilst the organisation has communicated its 5-year outlook and efficiency target, particular focus continues within the following areas:

- **Project Transition To Live Services:** As digital programmes & projects are implemented and transition to live services (and DHCW core business activity), it is vital that recurrent funding is secured to ensure services can be sustainably provided to the required levels. As with 2024/25 we will look to build upon the welcome progress seen last year and continue explore with Welsh Government the need to support EPMA (£0.170m pa) and EPS (£1.808m pa). As part of the forward look engagement with Welsh Government, we have identified as a recurrent requirement and will work with WG to identify an appropriate allocation for 2026/27.
- **Changing Service Models/Technology Layer:** Discussion with Welsh Government continues regarding the future revenue funding requirement needed to support the shift from CAPEX to OPEX service models (as part of the Cloud Transition programme). A checkpoint has been scheduled for September 2026 as part of the Cloud Transition programme.



- **SLA Charging Review:** This review aims to ensure that the cost and charging of digital service provision is transparent, equitable, and aligned with usage and value delivered to NHS Wales organisations. Sessions continue with multiple organisations as part of engagement to inform the approach if the exercise and ensure stakeholder requirements are satisfied. As part of DHCW's financial planning assumptions, we have assumed that any changes would be enacted in 2027/28 following consultation and agreement in 2026/27.
- **Programme Funding:** DHCW continues to raise the challenges inherent in single year funding settlements to support multi-year programme delivery and the benefits of moving to a more secure arrangement as part of a transition to a product / service operating model. The Strategic Resourcing Group continues to build on its initial findings to finalise a view on future capacity requirements (to meet pipeline projects). Following this, we will seek to engage with Welsh Government regarding the optimum way forward to address this matter and minimise the risk currently assessed at £1.5m.

4.2.4 Microsoft VAT Recovery: DHCW has received a protective assessment from HMRC dated 31 July 2025, covering the July 2021-December 2021 accounting period. This assessment totals £4.023m in VAT, with £0.852m in default interest. HMRC has confirmed that enforcement is paused pending further internal discussions. Whilst DHCW has held a provision for the VAT assessment value, it does not hold a provision for the interest liability given that the cash was transferred to WG in line with requirements.

4.2.5 Vacancies/Vacancy Management: Recruitment cadence has been low compared to establishment due to the progressing transformation and change as the organisation implements its new target operating model. Through the established Planning & Performance Management Group, the impact of any resource and capacity issues is discussed, addressed or if required escalated with mitigating options. During the first three quarters we have established a mechanism to focus funding to accelerate achievement of IMTP deliverables and direct external resource where required.

4.2.6 Microsoft Renewal: Digital Health and Care Wales owns the All-Wales Microsoft Enterprise Agreement on behalf of all organisations in NHS Wales. The contract commenced in July 2022 for a period of three years with option to extend for up to two years. A decision was made in January 2025 to extend for 12 months following consultation with Directors of Digital and commercial options appraisal. A formal programme board with membership from all NHS Wales organisations has been established to support the renewal of the Microsoft 365 Enterprise Agreement (EA), to commence from 1st July 2026. A business case is being drafted with further analysis underway and a status update was shared as part of DHCW's Draft Financial Planning assumptions via appropriate forums including DDOFs on 16th December 2025



5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 Key Issues & Risks

5.1.1 2025/26 Forecast: The forecast end of year position is for the organisation to meet all its statutory financial objectives. However, the quantum of any underspend will be dependent upon a number of variables, particularly those surrounding the final recruitment / vacancy position, GP migrations, confirmation of WICIS and VAT interest. The mitigation of identified risks (such as Microsoft VAT interest) may also impact the final reported figure.

5.1.2 Fixed Term Funded Resource – Exit Management: There are a number of staff working within non-core programmatic areas such as National Priority (DPIF) schemes, which have time-limited funding arrangements. Should DPIF funding for 2026/27 not be confirmed to progress schemes (or it reaches its end), DHCW will be required to either manage the reassignment or exit of staff leading to a possible financial pressure. To address this, DHCW has set up a Task and Finish Group to focus on the review of fixed term staff within DHCW. We will also look to discuss with Welsh Government a more effective mechanism for funding requirements of this type with a view on the needs of the future digital pipeline.

5.1.3 WICIS: The WICIS programme Board have endorsed the option to proceed. DHCW have shared the strategic assessment with Welsh Government on the 21st November. Directors of Digital submitted a paper to Welsh Government demonstrating support for progress. Subsequently there is a risk that 2 LHB positions have changed. DHCW have been working with Welsh Government on the ministerial briefing and a decision from WG was expected in mid-December. We are still awaiting the final confirmation from WG. A decision is required to ensure supplier continuity or address any impairment funding implications should a decision be made not to proceed. Any delay in deciding the outcome could present a material financial and commercial risk to the organisation. We will continue to provide updates to Welsh Government finance colleagues on progress.

5.1.4 LIMS 2.0: The programme is behind schedule and will not complete all implementations by March 2026. Tranches 2 and 3 are projected to go live by the end of FY25-26, but Tranche 4 (Blood Sciences) faces high risk due to dependency on the aliquot solution, and Tranche 5 (Blood Transfusion) is expected to slip into FY26-27. Resourcing challenges within Local Health Boards, particularly for user acceptance testing, remain a key constraint. The delay and extension of work into the final quarter of 2025/26 will result in additional revenue and capital costs, and DHCW will cover these through DPIF Funding Portfolio reallocation. However, further delays into FY26-27 would incur significant additional costs, making timely resolution of technical dependencies and resource issues critical to minimising financial impact and achieving programme objectives.



5.1.5 2026/27 IMTP DHCW received the NHS Wales Planning Framework on December 19th 2025. The key messages are that plans must be delivered within existing resources, excluding discretionary investments, with a focus on savings and maintaining recurrent mitigations. For DHCW, there will be no funding uplift outside of pay, with separate consideration of allocations alongside delivery expectations. A 1.11% uplift has been allocated to Health Boards for core cost inflation and unavoidable demand pressures including healthcare agreements between bodies in NHS Wales. DHCW will therefore apply the 1.11% uplift to SLA arrangements for 2026/27 as a mitigation for some of the unavoidable core cost inflation in relation to digital inflation.

The expectations set out in the Planning Framework should be achieved within existing resources. Plans are expected to be free from discretionary investment with funding used to support inescapable demand and unavoidable inflation. As in previous years, funding for NHS pay awards in 2026-27 will be held centrally and allocated to employers once awards are agreed. There will be a focus on savings with an expectation that savings and mitigations delivered in 2025/26 are maintained in full on a recurrent basis. There will be an increase in discretionary capital allocations, which is a 12% uplift on the baseline allocation, to support local plans and resilience.

The Principles for Financial Plans are as follows:

- **Statutory Duty** – Plans should set out how organisations will secure compliance with their break-even duty over a rolling three-year accounting period, while improving population health and healthcare delivery. Plans will be subject to scrutiny on the following:-
- **Ambition** – Whether the plan is ambitious enough in the scope of its savings and efficiencies; improving productivity while driving out harm, waste and variation.
- **Route to financial balance**- There is a clear, credible path to financial recovery and financial balance.

Robust and Deliverable – Plans should be supported by evidence-based assumptions and forecasts. They must have Board approval and full senior leadership ownership.

Triangulated – Plans must show that resource prioritisation aligns with national priorities and objectives and ensure they triangulate fully across operational delivery, workforce and finance.

Value & Sustainability – Saving plans should be appropriately assured and opportunity driven – incorporating both local and national opportunities and enablers. The plans should clearly demonstrate the organisation's approach to maximise resource utilisation through improved productivity and efficiency. The plans should further explain the route to embed Value Based Health Care principles and culture across the organisation.

Risk Management – Plans should clearly explain any material risks and opportunities,



and how these will be managed.

Capital – Capital investment must be prioritised to deliver national and local objectives effectively.

The key deadlines from Welsh Government are as follows:

- By 13 February 2026 – DHCW is required to submit an Accountable Officer letter if it is unable to produce a balanced IMTP.
- By 27 February 2026 – confirmation of ability to agree SLAs / LTAs and plans for commissioned and provider services.
- By 31 March 2026 – Final Board approved Plan, Ministerial templates and MDS submission, including the financial templates.

At the time of writing the report, DHCW has not yet received a funding allocation letter. However, it is expected that there will be no funding uplift outside of pay awards in line with wider Trust / SHA Funding assumptions issued by NHS Wales Performance and Improvement. It is expected that the funding allocation letter will be issued alongside the mandate and remit letter.

Key risks: At the time of writing, formal funding confirmation from Welsh Government is outstanding for national programmes, primary care GP funding, and BAU funding. Non-recurrent programme funding is also unconfirmed. DHCW faces a significant savings requirement and must manage a brought-forward deficit of £0.4 million from 2025/26.

Digital Inflation: As a result of recent events in the global economy, DHCW Finance and Commercial teams are working with service leads and external organisations to quantify potential internal and pan NHS Wales financial exposure to exchange rate fluctuations, tariffs and other economic factors in addition to the implementation of National Insurance increases and potential impact on suppliers' costs. Progress is being reported via Directors of Digital and other appropriate stakeholder forums. DHCW has worked with the Financial Planning and Delivery Unit to agree an estimate of digital inflation (c. 11%) that can be used for planning purposes nationally across NHS Wales.

5.1.6 2026/27 Programmes Forward Look The granular level indicative financial forward look for 2026/27 has been submitted on 20th October to Welsh Government. The output incorporates pipeline resource requirements and any resource gaps or surpluses. At the time of writing, DHCW is still awaiting a response on the allocation.



6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

SHA Board is being asked to

RECEIVE and **DISCUSS** the contents of the financial report for December 31st, the forecast achievement of financial targets and to **NOTE** the Financial plan 2026/27 timeline and approach

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES STRATEGIC PROCUREMENT REPORT

Eitem ar yr Agenda: Agenda Item:	6.3
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	2 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Claire Osmundsen-Little, Executive Director of Finance
Paratowyd gan: Prepared By:	Laura Panes, Strategic Commercial Manager
Cyflwynwyd gan: Presented By:	Claire Osmundsen-Little, Executive Director of Finance

Pwrpas yr Adroddiad: Purpose of the Report:	For Approval
Argymhelliad: Recommendation:	SHA Board is being asked to
To APPROVE one (1) Contract Award Papers, as set out below: i. P159.07 Microsoft Server and Cloud Enrollment ("SCE") Agreement	



1 ASESIAD O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Prosperous Wales
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<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	N/A
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAD O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
Choose an item.	Outcome: N/A
Datganiad: Statement:	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below To the extent as set out in the Procurement and Contracting activity within this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below To the extent as set out in the Procurement and Contracting activity within this report.
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Julie Francis, Head of Commercial Services	12/01/2026	APPROVED
Chris Moreton, Deputy Director of Finance	12/01/2026	APPROVED
Management Board	15/01/2026	APPROVED

Acronymau Acronyms			
CCS	Crown Commercial Services	DHCW	Digital Health and Care Wales
EA	Enterprise Agreement	GCP	Google Cloud Platform
MOU	Memorandum of Understanding	MPSA	Microsoft Products and Services Agreement
NPS	National Procurement Services	SA	Software Assurance
SCE	Server and Cloud Enrollment	SFIs	Standing Financial Instructions



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The Commercial Services Team, within the Finance and Business Assurance Directorate, in Digital Health and Care Wales (“DHCW”) manages a range of contracts supporting both National services and the internal requirements of the organisation itself. The procurement of these contracts is also led by the Team, which includes several specialist procurement staff from the NHS Wales Shared Services Procurement Service.
- 3.2 In accordance with the scheme of delegation in DHCW’s Standing Financial Instructions (“SFI’s”), Contracts to be awarded with a total contract value which exceeds £750,000 (excl. VAT) will be presented for the Board’s approval. In addition, the Board will also be required to approve any contracts which are to be extended either outside their initial term and/or in excess of the executed contract value.
- 3.3 For special Agreements such as Memorandum of Understanding (“MOU”), and other inter Authority Agreements, these are Approved by the Management Board and presented to the SHA Board for Noting. In the event of these Agreements over £750,000 excl. VAT, these will also require SHA Board Approval.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

1. Contract Awards

[Appendix 1](#) sets out one (1) Contract Award APPROVALS required by the Board. An overview of the contractual activity is provided below:

i. P159.07 Microsoft Server and Cloud Enrolment (“SCE”) Agreement

Contractor: Trustmarque Solutions
Term: Three (3) Years & two (2) Months; 01 February 2026 to 31 March 2029
Value: Total Value of **£3,179,001.76 excl. VAT**
Funding: This will be Revenue funded via existing budgets. No additional funding required.
Approval Requested: Contract Award

Context/Background:

DHCW is seeking approval of a new Microsoft Server and Cloud Enrolment (“SCE”) Call-Off Agreement to merge all core licences for Windows Server and Microsoft SQL Server into a single subscription across DHCW (Cloud & Infrastructure teams – Core server and Digital Workplace). The new SCE Agreement will provide licence subscription including Software Assurance (“SA”) across all licences, which is essential for leveraging hybrid cloud benefits



and ensuring compliance as DHCW migrates to the cloud.

This new agreement will replace the two (2) existing agreements within DHCW; the Microsoft Products and Services (“**MPSA**”) and our Microsoft Server Licensing Enterprise Agreement (“**EA**”), which have different renewal dates and lack unified management. The consolidation into a single Agreement will enable DHCW to reduce administrative overhead and the risk of compliance gaps, it will also support DHCW’s digital transformation and cloud migration strategy by ensuring all licences are cloud ready and compliant.

Please Note: No additional funding is required. Funding is within the existing budgets under cost code 7300, as agreed with Finance Business Partners.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no matters or risks for escalation.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	Management Board is being asked to
To APPROVE one(1) Contract Award paper, as set out below:	
i. P159.07 Microsoft Server and Cloud Enrollment (“SCE”) Agreement	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

CORPORATE RISK REGISTER

Eitem ar yr Agenda: Agenda Item:	6.4
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Bethan Walters, Corporate Risk Manager
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs/ Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the Risk and Board Assurance Framework Workplan. RECEIVE and DISCUSS the status of the Corporate Risk Register including changes since the last meeting.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Deliver high quality digital products and services
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	All are relevant to the report
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 14001 ISO 20000 ISO 27001 BS 10008	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: Safe Care Effective Care	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: Risk Management and Assurance activities equally affect all. An EQIA is not applicable.	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Additional scrutiny and clear guidance as to how the organisation manages risk has a positive impact on quality and safety.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be legal implications
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be financial implications
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Management Board	15/01/2026	Discussed and verified
Laura Tolley, Deputy Board Secretary Head of Corporate Governance	January 2026	Reviewed
Chris Darling, Director of Corporate Affairs Board Secretary	January 2026	Approved



Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
BAF	Board Assurance Framework	WG	Welsh Government
NI	National Insurance	DPIF	Digital Priorities Investment Fund
DSPP	Digital Services for Patients and the Public	WICIS	Welsh Intensive Care Information Service
WASPI	Wales Accord on the Sharing of Personal Information	NDR	National Data Resource
SLA	Service Level Agreement	IMTP	Integrated Medium Term Plan
IRAT	Integration and Reference Team	ICU	Intensive Care Unit
ISD	Information Services Directorate	HBs	Health Boards
WG	Welsh Government	FDU	Finance Delivery Unit
SAIL	Secure Anonymised Information Linkage	CAPEX	Capital Expenditures
OPEX	Operating Expenditures	DU	Delivery Unit
WEDs	Weekly Executive Directors	OCP	Organisational Change Policy

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The DHCW [Risk Management and Board Assurance Framework \(BAF\)](#) outlines the approach the organisation will take to managing risk and Board assurance.
- 3.2 The [Risk and BAF workplan](#) for 2025-26 includes progress of activity tracked on the forward workplan.
- 3.3 Risk should be considered from the perspective of opportunities and threats, managing risks effectively can often lead to realizing opportunities. With health services under more pressure than ever there is a huge opportunity to use digital products and services to drive efficiencies and improve patient outcomes. DHCW intends to be at the forefront of this, trends and opportunities include:
 - The growing importance of data
 - Digital services driving service transformation
 - Moving to Cloud services
 - International technical and data standards
 - Tackling a shortage of technology talent
 - A shift from capital funding to a recurrent revenue-based model
 - Organisations shifting from programme to 'product' based delivery models
 - Continuous agility in delivering digital services, modular components and mix and match
 - Automation and Artificial Intelligence
 - Open architecture where data exchange is facilitated between public and private

sector providers

- The increasing need to ensure robust, secure and solid digital foundations to enable successful digital delivery
- Patient empowerment Apps
- NHS Wales Digital Blueprint work
- NHS Wales Information Governance policy position
- DHCW Escalation Status

3.4 The below are key areas from the [World Economic Forum Term Global Risks Landscape \(2025\)](#) for context and consideration by the Board:

- Cyber insecurity
- Misinformation and disinformation
- Adverse outcomes of AI technologies

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 DHCW's [Corporate Risk Register](#) currently has 17 risks on the Register, 15 of which are detailed at item 6.4i Appendix A. There are 2 Private risks which are considered at every Digital Governance and Safety Committee.

4.2 Board members are asked to note the following changes to the Corporate Risk Register (new risks, risks removed and changes in risk scores) for the period 1 November 2025 to 31 December 2025:

NEW RISKS (1) 1 Private 0 Public

There was one new risk entered onto the register during the period.

RISK TITLE		RISK DESCRIPTION	EXECUTIVE OWNER	COMMITTEE ASSIGNMENT
DHCW0352 Delivery of 2025-2026 Milestones		IF delivery of 2025-26 milestones (agreed with Welsh Government through the IMTP and Remit Letter, or added as additional priority requirements during the year) is significantly behind the planned milestone completion profile THEN available resources may not be sufficient to recover delayed milestones within the year RESULTING IN agreed milestones or additional priority requirements not being delivered in year, leading to potential reputational impact,	Executive Director of Strategy	Programmes Delivery Committee



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Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

		escalations to executive directors and reduced confidence in DHCW's ability to deliver.		
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RISK REMOVED (0) 0 Public - 0 Private

There were no risks removed during the period.

RISKS WITH A CHANGE IN SCORE (0)

There were no changes in score during the period.

- 4.3 The Board is asked to consider the DHCW Corporate Risk Register Heatmap showing a summary of the DHCW risk profile. The key indicates movement since the last risk report.

		LIKELIHOOD				
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CONSEQUENCES	CATASTROPHIC (5)					DHCW0298 - Delay in WLIMS Implementation 2.0 →
	MAJOR (4)			DHCW0349 - RADIS Team Scaling Back 25/26 → DHCW0352 - Delivery of 2025-2026 Milestones ★	DHCW0336 Audit + Withdrawal from Contracts → DHCW0337 Sustainable Digital Services and Development Funding Model → **DHCW0341 → **DHCW0342 → DHCW0346 DDaT Governance Review Implementation → DHCW0348 Transition to new data Architecture →	DHCW0331 - Fixed term funding resource → DHCW0333 - WICIS Implementation Delay → DHCW0263: DHCW Functions → DHCW0320 - Citizen and stakeholder trust in use of HSC data →
	MODERATE (3)		DHCW0300 - Canisec (Screening and Palliative Care) →		DHCW0347 National Target Architecture Roadmap → DHCW0237 - New Requirements impact on resources and plan →	DHCW0351 - Changes in political landscape in Wales →
	MINOR (2)					
	NEGLIGIBLE (1)					

★ New Risk

→ Non-Mover

↓ Reduced

↑ Increased

- 4.4 All the risks on the Corporate Risk log are assigned to a committee as outlined in the Risk Management and Board Assurance Framework Strategy to provide the SHA Board with the necessary oversight and scrutiny. As previously stated, the private (commercially sensitive, cyber and security related) risks are reviewed in detail by the Committee's in a private session.



5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 The Board is asked to note the recent changes in the corporate risk profile, as a result of the escalation of one risk.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

SHA Board is being asked to

NOTE the Risk and Board Assurance Framework Workplan.

RECEIVE and **DISCUSS** the status of the Corporate Risk Register including changes since the last meeting.

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

PEOPLE AND CULTURE REPORT

Eitem ar yr Agenda: Agenda Item:	6.5
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	2 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Samantha Morgan, Director of People and Organisational Development
Paratowyd gan: Prepared By:	Sarah Brooks, Head of Culture & People Strategy
Cyflwynwyd gan: Presented By:	Samantha Morgan, Director of People and Organisational Development

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the People & Culture Report.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Prosperous Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: A Resilient Wales, A Healthier Wales, A More Equal Wales, A Globally Responsible Wales, A Wales of Cohesive Communities,	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	BS 76000 - Valuing People Standard
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 30415	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Workforce
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Person Centred
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: Culture, Leadership, Learning and Improvement Timely, Efficient, Effective	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: EQIA is not required	



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ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below DHCW has implemented continuous improvement mechanisms such as the Culture Improvement Group, People & Culture dashboards, and regular pulse surveys to monitor and enhance workplace standards.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Legal compliance is maintained through robust governance and leadership oversight, as evidenced by the successful retention of BS 76000 Valuing People and ISO 30415 Diversity and Inclusion certifications
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Resources are strategically allocated to support staff engagement activities, leadership development programs, and the maintenance of quality standards
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below Workforce initiatives include leadership development days, values-led engagement events, and tailored learning pathways, all designed to foster an inclusive and high-performing environment.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below Socio-economic impacts are addressed through the People Promise, which champions equality, diversity, and inclusion, and aligns with the Well-being of Future Generations Act by promoting a resilient, healthier, and more equal Wales.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	Yes, please see detail below Research and innovation are advanced through ongoing staff engagement, feedback tools, and the sharing of best practices across directorates, ensuring the organisation remains adaptive and forward-looking

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
POD SLT	06/01/25	Approved



Weekly Execs	07/01/25	Approved
Management Board	15/01/25	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
POD	People and Organisational Development	EDI	Equality, Diversity and Inclusion
HEIW	Health Education and Improvement Wales	WMTY	What Matters to You
SEP	Strategic Equality Plan	WG	Welsh Government
ISO	International Standards Organisation	NWSSP	NHS Wales Shared Services Partnership

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The purpose of this report is to provide the Board with clear assurance that sustained, strategic progress is being made in shaping a culture that enables high performance, resilience, and long-term organisational success.

This work supports delivery of the Long-Term Strategy, is rooted in our People First Principle, and strengthens our ability to deliver Mission 5, becoming a trusted strategic partner.

3.2 STRATEGIC CONTEXT

Digital Health and Care Wales is undertaking a deliberate, sustained programme of cultural transformation because culture is a key enabler of performance, quality, and delivery at scale.

In a complex and fast-moving digital health environment, delivering high-quality services depends as much on how well we lead, collaborate, learn, and adapt as it does on technical capability. For that reason, we are treating culture, leadership capability, and workforce experience as core strategic levers in achieving our organisational objectives.

Over the past six months, this approach has been strengthened through the refresh of the [People Strategy \(Appendix 1\)](#) and the development of the Culture Framework and Roadmap, supported by the [People Promise \(Appendix 2\)](#). Together, these provide a clear, aligned framework that connects our values and behaviours with leadership expectations and external assurance standards, including BS 76000 and ISO 30415.

This work has been shaped with our people. Engagement through surveys, listening events, focus groups, and partnership working has ensured the approach is grounded in lived experience and informed by evidence, reflecting the needs of our diverse workforce. It also ensures culture is embedded into how we prioritise work, develop

leaders, manage risk, and support delivery, rather than being treated as a separate initiative.

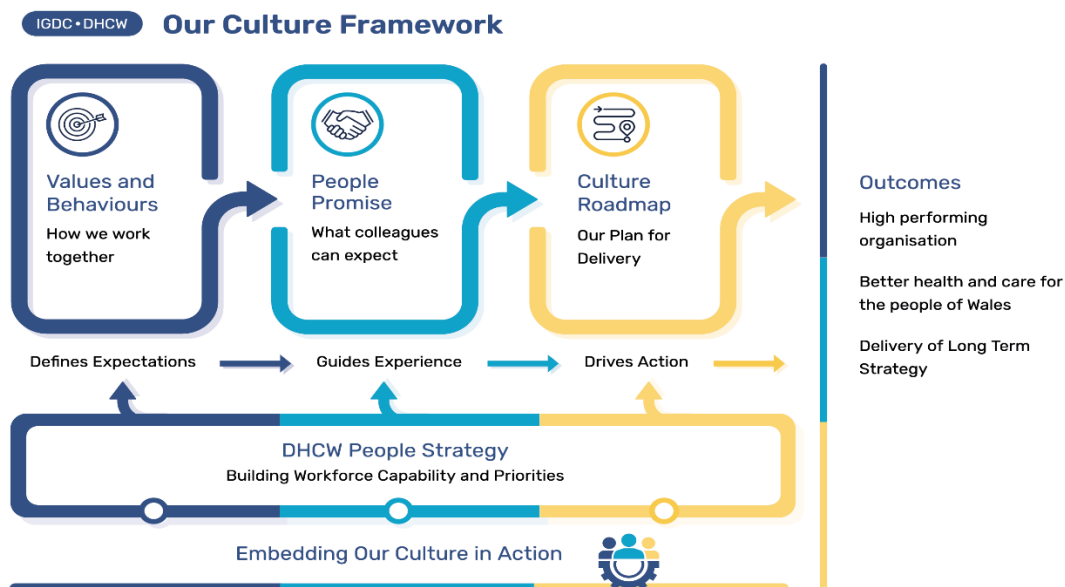
This report provides the Board with assurance on progress and impact to date, the governance and insight in place, and the next phase of activity required to maintain momentum and realise the full benefits of this work.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 Strategic Alignment of Our People and Culture Approach

The diagram below shows how the People Strategy, Culture Framework, People Promise, and Culture Roadmap work together as a single, connected system.

- The People Strategy sets our workforce priorities and where we will focus investment to enable delivery
- The Culture Framework defines what good looks like through clear values, behaviours, and standards, and
- The People Promise translates this into the experience colleagues should consistently feel in practice.
- The Culture Roadmap then turns this intent into action, setting out how we will embed these elements into day-to-day delivery and across the full employment relationship, supported by engagement, insight, and governance to maintain momentum and assurance.



4.2 Culture as a Driver of Performance and Sustainability



A clear and explicit aim of our culture programme is to strengthen organisational performance and long-term sustainability. The initiatives underway are intentionally designed to reinforce one another, creating a system that supports clarity, capability, insight, assurance, and continuous improvement.

Collectively, these interventions demonstrate a maturing and strategically aligned approach to culture at Digital Health and Care Wales.

The immediate impact is greater visibility of workforce experience, stronger alignment between People Strategy and organisational delivery, and clearer assurance over cultural risks and standards. These are summarised in the [Initiatives & Impact table in Appendix 3](#).

Importantly, the work we have completed in 2025 has established strong foundations for the future. By embedding culture into leadership practice, governance arrangements, and performance management, DHCW is creating the conditions for sustained improvement rather than short-term change.

As the refreshed People Strategy and Culture Framework are launched, and as engagement deepens through 2026, we expect to see continued improvements in staff engagement, leadership effectiveness, and organisational performance.

Maintaining focus on measurement, feedback, and accountability will ensure that culture remains a powerful enabler of delivery, resilience, and long-term success.

4.6 Enablers of delivery and assurance

The following updates alongside the [key achievements and future focus document in appendix 4](#) provide additional assurance that our culture and people commitments are being translated into disciplined delivery and strengthened governance. Together they demonstrate how the Culture Framework and People Promise are being reinforced through external standards, workforce assurance activity, wellbeing and inclusion practice, and partnership working, all of which support organisational performance and sustainability.

- **External standards and assurance (BS 76000, ISO 30415):** Certification was successfully maintained in November 2025. This provides independent assurance that our people practices are robust, inclusive, and continuously improving, and that our cultural intent is supported by measurable standards and governance.
- **Health and wellbeing:** Local wellbeing activity continues through an engaged Health and Wellbeing Network, supporting resilience and helping sustain performance during periods of organisational pressure.
- **Equality, diversity and inclusion:** Welsh Government feedback on the Strategic Equality Plan Assurance Framework and Workforce Race Equality Standard provides validation and direction for continued improvement. Ongoing cultural celebrations and



Safe Space sessions support inclusion and psychological safety, reinforcing the lived experience described in our People Promise.

- **Workforce audits:** The NWSSP recruitment audit is underway, with continued support for other external audits. This strengthens assurance over workforce processes, reinforces compliance, and supports consistent experience across the employment relationship.
- **Social partnership:** Social Partnership principles continue to be embedded across culture and strategy, with a case study being co-produced for publication. This strengthens alignment with national expectations and supports mature, sustainable employee relations.

4.2 Next Steps

The next phase of this work focuses on embedding our cultural ambition into consistent, day-to-day practice, ensuring it is experienced by colleagues and evident in how we deliver.

Delivery of the Culture Roadmap will progress at pace, with the Culture Framework and People Promise systematically embedded across the full employment relationship, including recruitment, onboarding, leadership and management practice, learning and development, performance, wellbeing, and inclusion.

This will strengthen alignment between our values and behaviours and our organisational priorities, supporting a consistent colleague experience and a high-performing, resilient organisation.

A structured programme of communication and engagement will continue throughout 2026 to keep colleagues informed, involved, and actively shaping the ongoing development of our culture.

Progress will be monitored through established governance, insight, and reporting arrangements, providing the Board with ongoing assurance that delivery remains focused, aligned, and contributing to organisational performance and sustainability.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 Workforce Engagement and Capacity

There is a risk that operational pressures limit colleagues' ability to engage meaningfully in culture and listening activity, slowing cultural embedding and reducing staff voice. This will be mitigated by embedding engagement activity into day-to-day delivery, reinforced through clear leadership prioritisation and monitoring of participation.

5.2 Sustaining Momentum and Assurance

There is a risk that focus and momentum reduce over time, particularly in relation to audit



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Digidol Cymru
Digital Health
and Care Wales

actions and external standards. This will be mitigated through clear ownership, a single audit tracker, and regular executive and Audit & Assurance oversight.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
NOTE the People & Culture Report.	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

PERFORMANCE REPORT

Eitem ar yr Agenda: Agenda Item:	6.6
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Claire Osmundsen-Little, Executive Director of Finance
Paratowyd gan: Prepared By:	Sarah Smith, Organisational Performance Specialist
Cyflwynwyd gan: Presented By:	Claire Osmundsen-Little, Executive Director of Finance

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS the performance detailed in the DHCW Performance Report.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	N/A
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Choose an item.
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement:	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Additional scrutiny and development of transparent organisational performance reporting has a positive impact on quality.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below There is a duty to monitor, report on, and improve performance.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Should effective performance management not take place, there could be financial implications.
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below Key organisational decision makers and leaders should be aware of an act upon the elements of performance for which they hold responsibility or accountability.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Claire Osmundsen-Little	19/01/2026	Approved



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

The [DHCW Integrated Performance Report](#) provides evidence of performance against key indicators across Digital Health and Care Wales and is linked to the Strategic Missions defined within our Integrated Medium-Term Plan (IMTP).

Performance is monitored and managed at various levels throughout the DHCW governance structure, with final oversight through Management Board and then our Special Health Authority (SHA) Board.

The Executive Summary is structured, as follows:

- Current priorities
- Stakeholder performance
- Organisational Capacity performance
- Internal Processes
- Financial Stewardship

3.1 Accountability Conditions

DHCW has achieved 1 out of 13 Accountability Conditions (AC11: The IMTP and summary explainer video must be published on your organisation's public facing website) in line with the plan. There has been strong progress and delivery against the remaining 12 conditions, with ongoing monitoring and review at monthly IQPD Meetings.

DHCW's Public Accountability Meeting is scheduled for 29th January 2026.

3.2 Mission Achievements

Information on the key updates and achievements across each mission is detailed in the [Q3 Strategic Performance Report](#).

3.3 Escalation Status

Our Escalation status in the Escalation and Intervention Framework with Welsh Government was confirmed as remaining at level 3. With regards to DHCW's Improvement Plan, 29 out of 38 actions have now been achieved. Further detail has been included within the "DHCW Escalation Improvement Status-Update" report.



4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 Current priorities

4.1.1 Delivery of Major Programmes

The **RISP** Programme continues to make progress with HDUHB going live in December. However, there are several challenges that may affect programme delivery timelines, including delays from the supplier and cross-border operational dependencies across Health Boards and Trusts which is expected to mean one or possibly two Health Board implementations will move into Q1 2026/27.

The **LIMS2.0** programme board reported that delivering implementation of all the disciplines within 2025/26 is no longer considered feasible. The current delay is forecast to extend to the end of Q1 2026/27 and has resulted in further discussions to plan with CEOs, DoD and DoF to work together to agree a forward plan and the consequential resource and finance implications.

Timelines for **Connecting Care** remain challenging, impacted by later than planned secured funding. Plans for delivery for Quarter 4 are currently being baselined and agreed with partners.

The **WICIS** Programme is progressing, and all milestones for the discovery stage achieved by the end of the Quarter. A decision regarding the future direction of WICIS is expected imminently, informed by the outcomes of the discovery work and advice received to date.

Progress has been made against key **NHS Wales App** milestones. Waiting list and hospital referral features were successfully deployed across Wales between Oct 25 – Jan 26. The Digital Services for Patients and the Public programme is on a pathway to closure with, responsibility for the App transitioned to PCMH.

4.2 Key Performance Messages

DHCW demonstrates strong performance across key areas:

- Freedom of Information Request Response Rate
- Headcount & Turnover
- NHS Wales App usage
- Recruitment Processes
- SLA Reviews

4.2.1 Stakeholder

In December, the response rate to Freedom of Information requests at DHCW was on target at 100%, for the first time in six months. This highlights the impact of improvement plans, set out by the Information Governance team, and effort from colleagues across DHCW, to ensure



compliance against industry standards is maintained through timely data provision to DHCW's stakeholders, promoting organisational transparency and public trust.

Complaints and Enquiries, particularly those related to the NHS Wales App (1) and Dental Access Portal (2), continue to decline since their peak in March, with any remaining issues appropriately referred. This downward trend signals improvements in service quality and responsiveness.

All SLA reviews were completed in December as expected. These are essential for maintaining service standards and ensuring accountability across organisations.

Collectively, these updates demonstrate that DHCW is making tangible progress in digital transformation, stakeholder engagement, and service quality. At the same time actively addressing areas where performance has slipped, reinforcing a culture of accountability and continuous improvement.

4.2.2 Organisational Capacity

Headcount (1247) and Turnover (8.03%) are stable and outperform sector averages, indicating a healthy and consistent workforce. Female workforce representation has remained steady at 44%, reflecting ongoing progress toward gender diversity goals. "Not known / Other" has been reported as the most common Reason for Leaving, limiting insight into staff attrition. Improving exit data collection is essential to inform retention strategies.

These metrics show that DHCW is maintaining a stable, well-trained, and increasingly diverse workforce, which supports organisational resilience and performance. However, better understanding of why staff leave is needed to further strengthen retention and workforce planning.

4.2.3 Internal Processes

Updates against key internal processes show that DHCW is actively managing operational risks, improving security and safety, and holding teams accountable for timely action. This supports better governance, reduces vulnerabilities, and helps maintain high standards of service and staff wellbeing.

One Information Governance incident took place in December, in relation to a third-party supplier migration error. This has been recorded as an incident on DHCW's Datix and the DPO has been informed. Now resolved with no adverse outcome

One Audit action is not on track to be completed on time. This relates to potential data protection and compliance risks under the GMS Clinical System Migration Project. Commercial Services are working to resolve this matter with suppliers, however, it is dependent on responses, to complete this action. An extension to 31st March 2026 was approved at the Audit and Assurance Committee in January.

4.2.4 Financial Stewardship

DHCW is presenting a month end underspend of £0.192m. This variance is primarily driven by vacancies. DHCW is on track to deliver its savings target of £1.6m for the 2025/26 financial year. The National Priorities Fund spend to date is £21.230m, against an allocation of £30.451m (inc. health board contributions). Capital for the year is £6.216m against a limit of £12.821m. As of 31st December, cash balance is £0.416m with agency and third-party contractors spend to date, at £1.048m.



4.3 Ongoing Areas of Concern

Active Problems with an identified root cause (RC) has dropped slightly (58.07%). Investigations concluded closure of old Problem records with unidentified root causes, as part of data cleansing activities undergone by the technical teams. Planning is underway to introduce a more effective categorisation system of root causes that will help improve the reporting as well. Any RC unidentified will benefit from the new RCA approach, an action proposed is to provide better categorisation to improve reporting.

Appraisal compliance (83.08%) remains below the 85% target and has done so since September 25. This decline is seen across several directorates and is partly attributed to the high volume of ongoing change processes. While efforts are underway to address under-compliance, there is a risk that appraisal rates may remain below target if line managers do not prioritize them alongside other demands. Timely appraisals are essential for staff development, engagement, and regulatory assurance.

Whilst remaining above the 20% target, the First Line Fix Rate has slightly declined from 22.46% to 20.98%. Discussions at the Operational Service Board identified current obstacles contributing towards this gap, which include extending training to the Service Desk staff to support new areas in need, whilst maintaining service continuity.

Telephone Abandoned rate (Welsh Line) was impacted in December due to the loss of staff within the service and an increased number of staff with booked leave, leading to an outturn measure of 9.76% against a target of 5%. The Service are looking to address this shortfall in performance against this target but acknowledge that this may not be immediate due to the current staffing challenges.

In December, DHCW experienced 4 Major Incidents, down from 11 in November, all of which were resolved within their SLA. One was a result of a failed change. DHCW's Change Success Ratio (98.19%) is high, compared to industry standards. However, following a comprehensive analysis of Major Incidents arising from operational changes during 2025, the Change Management Process team is preparing a revised 2025 report to impact improvements and will be shared with the Operational Service Board, for agreement and added to iPassport for management through the Quality Improvement process.

Quality Management compliance (88%) remains below the target of 90%. Failure to achieve target dates on corrective actions raised through internal/external audits, major incidents & inspections has led to a decrease in the Quality Improvement Status (74%). 7 of the 24 open findings past target date are results of Major Incidents. The owners of the findings are being contacted to progress closure if/where possible, escalations will be raised to DATIX for major findings and incidents, which cannot be closed. Some of the open findings from external audit, cannot be closed until reaudit. Alignment of these dates will bring the position back to 85%.

Overall Confidence of Delivery for the IMTP remains strong at 78%. While this represents a slight shift from November's 80%, the change reflects the inclusion of additional milestones and the proactive reallocation and reprioritisation of resources to support an expanded programme of work.

Since last month a consolidation exercise has been undertaken for reporting purposes to provide the Board with delivery assurance. This brings together the original IMTP approved by



the Board and submitted to WG, along with the additional in-year priorities arising from the WG remit letter, escalation requirements, winter pressures, and the Ministerial Advisory Group.

DHCW's delivery confidence for the original IMTP has remained strong, even as resources have been reprioritised and reallocated to address additional milestones and requirements identified during the year. While the submitted and Board-approved IMTP set out 345 milestones, in-year priorities have resulted in a net increase of 58 milestones by the end of Q3. Despite this expanded scope, DHCW is forecasting delivery of more than 350 milestones, exceeding the number originally planned. This demonstrates the organisation's growing performance, flexibility, and ability to deliver at scale, even in the context of increased in-year pressures

Contact Events for the business change team engagement activity figures continue to decline, attributed to the reduced requests for deployment of products/features as the organisation transitions to the new product/service operating model. Since last month several meetings have taken place, particularly with the ops team to look at integrating the core business change team's work into the new product operating model for the Single Care Record. The internal milestone deliverable for future state recommendations in a costed operating model for clinical informatics and business change services continues to be developed in readiness for year end.

4.4 New Areas of Concern

No performance metrics have reached the tolerance level to be flagged as new areas of concern in December.

4.5 Resolved Areas of Concern

The current position with DHCW Recruitment processes continue to improve, with the targets of all KPIs, met. The average time from Vacancy Creation to Unconditional Offer has remained steady at 47.4 days. Hiring Manager training continues to be offered to all DHCW hiring managers, as part of DHCW's ongoing commitment to ensuring fair, consistent, and high-quality recruitment practices across the organisation. This will become mandatory for all recruitment after March 2026. Discussions continue with NWSSP to streamline shortlisting, further.

Service Availability remains above target and at its highest value (99.999%) since December 2024. National Service Tickets resolved within SLA continues its upward trend (96.35%). This metric continues to be closely monitored to ensure sustained performance. Systems Resilience continues to strengthen at 94.80% (against a target of 95%).

The number of Health and Safety Incidents reported at DHCW returned to zero in December, following a spike to four, in October. Reflection and review of actions from previous incidents is important to ensure prevention of future incidents and maintain workplace safety.

These improvements demonstrate that targeted actions are yielding positive results in both safety and operational efficiency. Sustaining this momentum will help reduce risk, improve staff



wellbeing, and ensure that service issues are resolved more quickly for the benefit of the entire organisation.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no key risks or matters for escalation.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	SHA Board is being asked to
RECEIVE and DISCUSS the performance detailed in the DHCW Performance Report.	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

AUDIT & ASSURANCE COMMITTEE

HIGHLIGHT REPORT

Eitem ar yr Agenda: Agenda Item:	6.7
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Enw'r Pwyllgor Name of Committee	Audit and Assurance Committee
Cadeirydd y Pwyllgor Chair of Committee	Marian Wyn Jones, Independent Member
Cyfarwyddwr Gweithredol Arweiniol Lead Executive Director	Claire Osmundsen Little. Executive Director of Finance
Dyddiad y Cyfarfod Diwethaf Date of Last Meeting	07 October 2025
Paratowyd gan Prepared By	Julie Robinson, Corporate Governance Coordinator
Cyflwynwyd gan Presented By	Marian Wyn Jones, Independent Member

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad / Recommendation:	
The Board is being asked to: NOTE the content of the report for ASSURANCE .	



1 ASESAD O'R EFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
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RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
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DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER	Information
PARTH ANSAWDD DOMAIN OF QUALITY	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	

DATGANIAD YR ASESAD O'R EFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT	Dyddiad cyflwyno: Date of submission: N/A
No, (detail included below as to reasoning)	Canlyniad: Outcome: N/A
Datganiad: Statement: There is no requirement for an EQIA.	

ASESIAD O'R EFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.



ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD-GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Person neu Grŵp sydd wedi derbyn neu ystyried y papur hwn cyn y cyfarfod hwn
Person or Group who have received or considered this paper prior to this meeting

PERSON NEU GRŴP PERSON OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Laura Tolley, Deputy Board Secretary	2025	Approved
Committee Chair		Approved

3 ACRONYMAU / ACRONYMS

DHCW	Digital Health and Care Wales	SHA	Special Health Authority

4 DIFFINIADAU / DEFINITIONS

RHYBUDDIO ALERT	Rhoi gwybod i'r Bwrdd/Pwyllgor am feysydd o ddiffyg cydymffurfio neu faterion y mae angen mynd i'r afael â nhw ar fyrder. Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently.
SICRHAU ASSURE	Nodwch yma unrhyw feysydd sicrwydd y mae'r Pwyllgor wedi'u derbyn. Detail here any areas of assurance that the Committee has received.
RHOI CYNGOR ADVISE	Nodwch yma unrhyw feysydd monitro parhaus lle mae diweddariad wedi'i roi i'r Pwyllgor. Detail here any areas of ongoing monitoring where an update has been provided to the Committee.



5 ARGYMHELLIAD & CHAMAU NESAF / RECOMMENDATION & NEXT STEPS

5.1 SESIWN GYHOEDDUS / PUBLIC SESSION

RHYBUDDIO ALERT	There were no items to alert to the SHA Board.
SICRHAU ASSURE	• Standards of Behaviour – the Committee were assured the fall in compliance of Declarations of Interest was a result of the three-year reporting cycle and was being addressed. • Internal Audit Review Reports The Committee received for assurance the following audit reviews: • Information Governance Framework – the review received a Substantial Assurance rating. • Staff Culture / Wellbeing (Advisory) – the review was not an assurance piece and therefore an assurance rating was not provided. The actions identified in the report were noted. • Audit Wales Committee Update – the Committee received the update which included: • A review of Digital Transformation across NHS Wales was underway. • Structured Assessment – Members received the report and welcomed the positive findings. • A Deep Dive on Estate Management remains in the scoping stage. Local Counter Fraud Update Report – The Committee received the standard report and noted the update to the work undertaking in the period • DHCW Escalation Approach the Committee noted the update on DHCW's approach to escalation • DHCW Response to Welsh Government Requirements the Committee were pleased to receive the information, noting it provided a quick oversight of the breadth of work and activity being taken forward to address the requirements • Digital, Data and Technology National Governance Update the Committee received a verbal update which provided the highlights of the work undertaken since the last meeting at a National level. • Board Assurance Framework – Deep Dive into Duty of Quality – the Committee received a comprehensive deep dive assurance update into the work being undertaken to embed the Duty of Quality across DHCW and reviewed the associated risks. • Corporate Risk Register – Members received updates on the four risks assigned to the Audit and Assurance Committee. Additionally, the Committee received the Annual Corporate Risk Trending Analysis. • Management of Physical Assets the Committee were assured that processes were being followed to manage the physical assets. • Welsh Language Report – Members approved the Mwy na Geiriau Annual Report for submission to Welsh Government and noted the draft Welsh



	Language Standards Compliance Notice.
RHOI CYNGOR ADVISE	There were no items to advise to the SHA Board.

5.2 SESIWN BREIFAT / PRIVATE SESSION

RHYBUDDIO ALERT	There were no items to alert to the SHA Board.
SICRHAU ASSURE	• Internal Audit Review – GMS Clinical System Migration System The Committee received for assurance the review which had received a Reasonable Assurance rating. • Spot Checks for Recruitment Processes Report the Committee received the report which provided progress on the action requested by the Committee following the recent Limited Assurance review into Recruitment Processes.
RHOI CYNGOR ADVISE	• Counter Fraud – verbal update – the Committee received a confidential update into a recent investigation by the Counter Fraud team. The Committee discussed the recent 'Failure to Prevent Fraud Legislation'.

5.3 CAMAU GWEITHREDU DIRPRWYEDIG A GYMERWYD GAN Y PWYLLGOR / DELEGATED ACTION TAKEN BY THE COMMITTEE

Approved the following:

- POD-POL-17 Equality Diversity & Inclusion
- DHCW-POL-19 Policy on Policies, Strategies and Frameworks
- CLS-POL-1 DHCW Joiners, Movers and Leaver's ICT Policy

Dyddiad cyfarfod nesaf y pwyllgor:
Date of next committee meeting:
20 January 2026



IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

DIGITAL GOVERNANCE AND SAFETY HIGHLIGHT REPORT

Eitem ar yr Agenda:
Agenda Item:

6.8

Enw'r Cyfarfod:
Name of Meeting:

SHA Board

Dyddiad y Cyfarfod:
Date of Meeting:

02 February 2026

Cyhoeddus neu Breifat:
Public or Private:

Public

IF PRIVATE: please indicate
reason:
OS YW'N BREIFAT: Nodwch
reswm:

N/A

Enw'r Pwyllgor
Name of Committee

Digital Governance and Safety Committee

Cadeirydd y Pwyllgor
Chair of Committee

Rowan Gardner, Independent Member

Cyfarwyddwr Gweithredol
Arweiniol
Lead Executive Director

Rhidian Hurle, Executive Medical Director

Dyddiad y Cyfarfod Diwethaf
Date of Last Meeting

20 November 2025

Paratowyd gan
Prepared By

Julie Robinson, Corporate Governance Coordinator

Cyflwynwyd gan
Presented By

Rowan Gardner, Independent Member

Pwrpas yr Adroddiad:
Purpose of the Report:

For Assurance

Argymhelliad / Recommendation:

The Board is being asked to:
NOTE the content of the report for **ASSURANCE**.



1 ASESAD O'R EFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
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RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
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DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER	Information
PARTH ANSAWDD DOMAIN OF QUALITY	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	

DATGANIAD YR ASESAD O'R EFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT	Dyddiad cyflwyno: Date of submission: N/A
No, (detail included below as to reasoning)	Canlyniad: Outcome: N/A
Datganiad: Statement: There is no requirement for an EQIA.	

ASESIAD O'R EFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.

ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD-GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Person neu Grŵp sydd wedi derbyn neu ystyried y papur hwn cyn y cyfarfod hwn
Person or Group who have received or considered this paper prior to this meeting

PERSON NEU GRŴP PERSON OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Laura Tolley, Deputy Board Secretary	2025	Reviewed
Committee Chair	09 Dec 2025	Approved

3 ACRONYMAU / ACRONYMS

DHCW	Digital Health and Care Wales	SHA	Special Health Authority

4 DIFFINIADAU / DEFINITIONS

RHYBUDDIO ALERT	Rhoi gwybod i'r Bwrdd/Pwyllgor am feysydd o ddiffyg cydymffurfio neu faterion y mae angen mynd i'r afael â nhw ar fyrder. Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently.
SICRHAU ASSURE	Nodwch yma unrhyw feysydd sicrwydd y mae'r Pwyllgor wedi'u derbyn. Detail here any areas of assurance that the Committee has received.
RHOI CYNGOR ADVISE	Nodwch yma unrhyw feysydd monitro parhaus lle mae diweddariad wedi'i roi i'r Pwyllgor. Detail here any areas of ongoing monitoring where an update has been provided to the Committee.



5 ARGYMHELLIAD & CHAMAU NESAF / RECOMMENDATION & NEXT STEPS

5.1 SESIWN GYHOEDDUS / PUBLIC SESSION

RHYBUDDIO ALERT	There were no items to alert to the SHA Board.
SICRHAU ASSURE	• Corporate Risk Register – Seven risks were reviewed; with four public risks updated. The update included a detailed review of risks DHCW0263 DHCW Data Functions, DHCW0320 Citizen and Stakeholder trust in uses of Health and Social Care data and DHCW0336 Citizen and Stakeholder trust. Additionally, the annual Corporate Risk Trending Analysis was received with the risk trends reviewed. • Incident Review and Organisational Learning Report – The Committee noted the work undertaken during quarter 2. • Information Governance Assurance Report – the Committee congratulated the team for achieving a recognised Code of Conduct for WASPI within the UK Information Commissioners Office (ICO). • Information Services Assurance Report – The Committee received the report and discussed how the new dashboard on ‘falls’ would be used. • Research, Innovation and Knowledge Management Assurance Report – The Committee received the report and noted the progress made particularly with the Open Access publishing initiative. • Wales Informatics Assurance Group Report – The Committee received the Wales Informatics Assurance Group report and noted the efficiency of the introduction of the WIAG Power App and embedding it across the organisation. • Technical Design Authority – The Committee received report on the Technical Design Authority and were assured by the direction of progress on initiatives.
RHOI CYNGOR ADVISE	There were no items to advise to the SHA Board.

5.2 SESIWN BREIFAT / PRIVATE SESSION

RHYBUDDIO ALERT	There were no items to alert to the SHA Board.
SICRHAU ASSURE	• National Intelligent Audit Solution (NIAS) Outline Business Case. The Committee received the NIAS Outline Business Case, and noted it would be presented to the next SHA Board meeting, marking the start of the procurement process.



	• Cyber Security Assurance Report. The Committee received the report which included the update on National Cyber Security. The Committee discussed the importance of National Governance for cyber in the Digital, Data and Technology (DDaT) Board, and noted concern that this is yet to be established. However, the Committee were assured that DHCW were engaging with Welsh Government on this important development. • Corporate Risk Register. The Committee discussed in detail the three private risks on the register.
RHOI CYNGOR ADVISE	There were no items to advise to the SHA Board.

5.3 CAMAU GWEITHREDU DIRPRWYEDIG A GYMERWYD GAN Y PWYLLGOR / DELEGATED ACTION TAKEN BY THE COMMITTEE

The Committee were delegated to approve the following policies:

- 1) ELIB-POL-2 AI in NHS Wales E-libraries
- 2) CS-POL-12 Acceptable Use Policy – Artificial Intelligence.

Dyddiad cyfarfod nesaf y pwyllgor:
Date of next committee meeting:

05 March 2026

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

LOCAL PARTNERSHIP FORUM HIGHLIGHT REPORT

Eitem ar yr Agenda: Agenda Item:	6.9
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Enw'r Pwyllgor Name of Committee	Local Partnership Forum
Cadeirydd y Pwyllgor Chair of Committee	Samantha Morgan, Director of People and Organisational Development
Cyfarwyddwr Gweithredol Arweiniol Lead Executive Director	Paul Evans, Head of Quality Assurance & Regulatory Compliance
Dyddiad y Cyfarfod Diwethaf Date of Last Meeting	04 September 2025
Paratowyd gan Prepared By	Belinda Mills, Corporate Governance & Risk Coordinator
Cyflwynwyd gan Presented By	Samantha Morgan, Director of People and Organisational Development

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad / Recommendation:	
The Board is being asked to: NOTE the content of the report for ASSURANCE .	



1 ASESIAD O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Be the trusted strategic partner and a high quality, inclusive and ambitious organisation
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RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
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DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Workforce
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Person Centred
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	

DATGANIAD YR ASESIAD O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT	Dyddiad cyflwyno:N/A Date of submission: N/A
No, (detail included below as to reasoning)	Canlyniad: Outcome: N/A
Datganiad: Statement: There is no requirement for an EQIA.	

ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.

ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD-GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Person neu Grŵp sydd wedi derbyn neu ystyried y papur hwn cyn y cyfarfod hwn
Person or Group who have received or considered this paper prior to this meeting

PERSON NEU GRŴP PERSON OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Committee Chair	December 2025	Approved

3 ACRONYMAU / ACRONYMS

DHCW	Digital Health and Care Wales	SHA	Special Health Authority

4 DIFFINIADAU / DEFINITIONS

RHYBUDDIO ALERT	Rhoi gwybod i'r Bwrdd/Pwyllgor am feysydd o ddiffyg cydymffurfio neu faterion y mae angen mynd i'r afael â nhw ar fyrder. Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently.
SICRHAU ASSURE	Nodwch yma unrhyw feysydd sicrwydd y mae'r Pwyllgor wedi'u derbyn. Detail here any areas of assurance that the Committee has received.
RHOI CYNGOR ADVISE	Nodwch yma unrhyw feysydd monitro parhaus lle mae diweddariad wedi'i roi i'r Pwyllgor. Detail here any areas of ongoing monitoring where an update has been



provided to the Committee.

5 ARGYMHELLIAD & CHAMAU NESAF / RECOMMENDATION & NEXT STEPS

5.1 SESIWN GYHOEDDUS / PUBLIC SESSION

RHYBUDDIO ALERT	There were no items to alert to the SHA Board.
SICRHAU ASSURE	• Corporate Risk Register: The Local Partnership Forum received the Corporate Risk Register and discussed the risks which would have an impact on DHCW workforce. • Workforce Performance Report: The Local Partnership Forum noted that Sickness absence has decreased to 3.2%, with short term absence at 1.85% and long-term sickness at 1.35%. LPF members were assured that Career pathways, a digital learning platform, targeted campaigns, safe space sessions, and embedding equality and diversity in recruitment and appraisals are addressing staff retention and mitigating risks. • NHS Wales Staff Survey Update: The Local Partnership Forum received an update and were assured of strong engagement across the organisation, including new initiatives like Executive Roadshows and Focus Groups to ensure staff ownership of the process.
RHOI CYNGOR ADVISE	• Trade Union Update: The local Partnership Forum received a verbal update from Trade Union representatives and discussed the pay award noting that Unite has been authorised to begin planning for possible industrial action, though no specific actions are currently underway and there is no direct impact on DHCW. Management and union colleagues continue to meet weekly, ensuring early visibility of any emerging issues. • Financial Performance: The Local Partnership Forum received an update on DHCW Financial Performance. • Estates Updates: The Local Partnership Forum received an update on the DHCW Estate, including completion of the Ty Glan-yr-Afon ramp, ongoing Digital Futures Space development, lease surrenders at Mamhilad House and Castlebridge 2 and planning for the Technium 2 lease in March 2026. Following an options appraisal, the Board approved reducing the estate footprint to two units in the Madoc Room. • Developing the Digital Profession – Update: The Local Partnership Forum received an update on progress with completing G-DAD role maps aligned to OCP priorities, including a January workshop with workforce and Digital Directors, initiatives to advance women in digital and technology roles, and also embedding the capability framework into recruitment and the appraisal processes. • Social Partnership Update: The Local Partnership Forum received an update on Social Partnership noting positive feedback on the case study showcasing DHCW's partnership approach and an invitation for DHCW to present it at a Welsh Government Practitioners meeting.



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NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

5.2 CAMAU GWEITHREDU DIRPRWYEDIG A GYMERWYD GAN Y PWYLLGOR / DELEGATED ACTION TAKEN BY THE COMMITTEE

N/A

Dyddiad cyfarfod nesaf y pwyllgor:
Date of next committee meeting:

02 March 2026

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

REMUNERATION & TERMS OF SERVICE

COMMITTEE HIGHLIGHT REPORT

Eitem ar yr Agenda: Agenda Item:	6.10
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Enw'r Cyfarfod: Name of Meeting:	SHA Board
Dyddiad y Cyfarfod: Date of Meeting:	02 February 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Enw'r Pwyllgor Name of Committee	Remuneration and Terms of Service Committee
Cadeirydd y Pwyllgor Chair of Committee	Ruth Glazzard, Interim Chair of DHCW SHA Board
Cyfarwyddwr Gweithredol Arweiniol Lead Executive Director	Helen Thomas, Chief Executive Officer
Dyddiad y Cyfarfod Diwethaf Date of Last Meeting	20 November 2025
Paratowyd gan Prepared By	Laura Tolley, Head of Corporate Governance/Deputy Board Secretary
Cyflwynwyd gan Presented By	Ruth Glazzard, Interim Chair of DHCW SHA Board

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad / Recommendation:	
The Board is being asked to: NOTE the content of the report for ASSURANCE .	



1 ASESIAD O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
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RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
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DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	

GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER	Information
PARTH ANSAWDD DOMAIN OF QUALITY	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	

DATGANIAD YR ASESIAD O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT	Dyddiad cyflwyno: Date of submission: N/A
No, (detail included below as to reasoning)	Canlyniad: Outcome: N/A
Datganiad: Statement: There is no requirement for an EQIA.	

ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.

ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD-GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Person neu Grŵp sydd wedi derbyn neu ystyried y papur hwn cyn y cyfarfod hwn
Person or Group who have received or considered this paper prior to this meeting

PERSON NEU GRŴP PERSON OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling, Director of Corporate Affairs Board Secretary	January 2026	Approved

3 ACRONYMAU / ACRONYMS

DHCW	Digital Health and Care Wales	SHA	Special Health Authority

4 DIFFINIADAU / DEFINITIONS

RHYBUDDIO ALERT	Rhoi gwybod i'r Bwrdd/Pwyllgor am feysydd o ddiffyg cydymffurfio neu faterion y mae angen mynd i'r afael â nhw ar fyrder. Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently.
SICRHAU ASSURE	Nodwch yma unrhyw feysydd sicrwydd y mae'r Pwyllgor wedi'u derbyn. Detail here any areas of assurance that the Committee has received.
RHOI CYNGOR ADVISE	Nodwch yma unrhyw feysydd monitro parhaus lle mae diweddariad wedi'i roi i'r Pwyllgor. Detail here any areas of ongoing monitoring where an update has been



provided to the Committee.

5 ARGYMHELLIAD & CHAMAU NESAF / RECOMMENDATION & NEXT STEPS

5.1 SESIWN BREIFAT / PRIVATE SESSION

RHYBUDDIO ALERT	There were no items to alert to the SHA Board.
SICRHAU ASSURE	The Committee discussed in detail an update on all Executive Team Members six-month review of objectives.
RHOI CYNGOR ADVISE	There were no items to advise to the SHA Board.

5.3 CAMAU GWEITHREDU DIRPRWYEDIG A GYMERWYD GAN Y PWYLLGOR / DELEGATED ACTION TAKEN BY THE COMMITTEE

The Committee approved a Redundancy Payment.

Dyddiad cyfarfod nesaf y pwyllgor:
Date of next committee meeting:

TBC